

CENTER MEMBERSHIP FORM

Check if you do NOT want NADSA to share your organization's contact information with other organizations interested in raising awareness of adult day services and supporting aging in place.

CENTER / ORGANIZATION NAME		
STREET ADDRESS		
CITY	STATE	ZIP
TELEPHONE		FAX
COUNTY		TAX STATUS
DATE CENTER OPENED		CENTER CAPACITY
CENTER EMAIL ADDRESS		
WEBSITE		
PRIMARY CONTACT PERSON		
PRIMARY CONTACT EMAIL ADDRESS		
BILLING ADDRESS if different from street address		
Does the program operate multiple centers? YES NO If yes, complete a separate Information Grid for each center.		NAME OF PARENT ORGANIZATION if applicable
NUMBER OF LOCATIONS		NUMBER OF EMPLOYEES _____ Send NADSA names and emails for those who should receive benefits

MEMBERSHIP TYPE	DESCRIPTION <i>(12 month term based upon date of membership acceptance)</i>	ANNUAL DUES	<input type="checkbox"/>
CENTER MEMBERSHIP <i>(choose one)</i>	Center Members own or operate Adult Day Centers.	\$359	
	Association Member Affiliates own or operate an adult day center that is a member of an Association that has joined NADSA. Identify Name of Association with which affiliated: _____	\$209	
	A Multi-Site Member is one of multiple centers that are owned and/or operated by a single entity. All multi-centers are required to purchase their memberships in aggregate to receive the multi-center membership rate. Identify Name of Owner/Parent of all centers _____	\$209 + \$99 for each additional center	

Remit to: NADSA, 1421 E. Broad Street, Suite 425, Fuquay-Varina, NC 27526, fax to 919-825-3945
or pay online at www.nadsa.org.

FOR CREDIT CARD PROCESSING ONLY:

Visa American Express MasterCard Account # _____

Expiration Date _____ Security Code _____ Today's Date _____

Card Holder's Name _____

Card billing address if different from above _____

* As a member of the National Adult Day Services Association, you join with other NADSA members in a mutual commitment to the continuation of quality adult day services as a means of meeting the ever-growing needs of persons who are frail, chronically ill or have disabilities. Please read the National Adult Day Services Association (NADSA) Code of Ethics carefully because when you join NADSA, you are agreeing to abide by the Code of Ethics. As a NADSA member you are obligated to report breaches of ethical conduct to NADSA and/or appropriate regulatory or civil authorities.

01.01.2015

Office Use Only: Entered in database _____ Member packet sent _____

Date Received _____ Amount Received _____ Date Membership expires _____

Multi-Center Information Grid
(Complete a grid for each adult day center)

CENTER # _____

CENTER / ORGANIZATION NAME		
STREET ADDRESS		
CITY	STATE	ZIP
TELEPHONE	FAX	
COUNTY	TAX STATUS	
DATE CENTER OPENED	CENTER CAPACITY	NUMBER OF EMPLOYEES
CENTER EMAIL ADDRESS		
WEBSITE		
PRIMARY CONTACT PERSON		
PRIMARY CONTACT EMAIL ADDRESS		
BILLING ADDRESS if different from street address		
NAME OF OWNER/PARENT ORGANIZATION		

CENTER # _____

CENTER / ORGANIZATION NAME		
STREET ADDRESS		
CITY	STATE	ZIP
TELEPHONE	FAX	
COUNTY	TAX STATUS	
DATE CENTER OPENED	CENTER CAPACITY	NUMBER OF EMPLOYEES
CENTER EMAIL ADDRESS		
WEBSITE		
PRIMARY CONTACT PERSON		
PRIMARY CONTACT EMAIL ADDRESS		
BILLING ADDRESS if different from street address		
NAME OF OWNER/PARENT ORGANIZATION		

More Information Grids can be found at www.nadsa.org

A spreadsheet including information for multiple centers can be submitted in place of the information grid.

NADSA Center Membership: What are the Options and Features?

	Center Members Own or operate Adult Day Centers.			Association Members Represent their members who understand and support the mission of NADSA.	Associate Members Have interests compatible with the charitable and educational purposes of NADSA, including prospective business owners. Non-transferrable.	
	Center Member	Association Member Affiliate Member of an Association that has joined NADSA	Multi-Center Member One of multiple centers that is owned and/ or operated by a single entity	Association Member	Individual Member	Student Member Enrolled in an accredited institution of higher education
Annual Membership Rate	\$359	\$209	\$209 for first center + \$99 for each additional center	\$350	\$99	\$69
Receive e-alerts, public policy updates and quarterly newsletter	✓	✓	✓	✓	✓	✓
Discounts on all NADSA webinars and events	✓ all staff included	✓ all staff included	✓ all staff included	✓ one contact	✓	✓
Listing in Membership Directory	✓	✓	✓	✓		
Access to Membership Directory	✓	✓	✓	✓	✓	✓
Special Acknowledgement on NADSA website	Prominent placement with contact information and mapping for referrals within the NADSA Locator			✓ Listing on Partners page	n/a	n/a
Access to Members Only Library	✓	✓	✓	✓	✓	✓
Membership Certificate	✓	✓	✓	✓	✓	✓
Discounts on all NADSA publications and products	✓ all staff included	✓ all staff included	✓ all staff included	✓ one contact	✓	✓
Eligibility to serve on NADSA committees	✓	✓	✓	✓	✓	✓
Eligibility to run for NADSA office	✓	✓	✓	✓	✓	✓
Eligibility to vote in NADSA elections	✓	✓	✓	✓		
Eligibility to participate in annual awards competition	✓	✓	✓	✓	✓	✓
Access to Members ListServ	✓	✓	✓	✓	✓	✓
Use of NADSA subscriptions for Survey Monkey and GoTo Meeting				✓		