



Please Return to:
 AAHAM Membership Department
 11240 Waples Mill Road, Suite 200
 Fairfax, VA 22030
 Fax: 703.359.7562
 Email: info@aaham.org

2018 National Membership Application

Name _____ Title _____

Employer Name _____ Email Address _____

Address Work

City _____ State _____ Zip _____ Country _____

Phone _____ Cell _____ Fax _____ Local Chapter _____

Address Home

City _____ State _____ Zip _____ Country _____

Membership Categories and Rates

* Local chapter dues may vary

NATIONAL MEMBERSHIP - The fee to become a National AAHAM member is \$209. If you join between July 1st and August 31st, the dues are \$160 for the rest of the current year. If you join between September 1st and December 31st, the fee is \$250 for the rest of the current year and all of the following year.

FULL TIME STUDENT MEMBERSHIP - Students taking at least 12 credit hours per semester can join for free. You must submit proof of your full time status with this application. Student members receive the benefits of membership with the exception of voting, eligibility for professional or executive levels of certification, and cannot be a proxy for a chapter president at any national board meetings.

PART TIME STUDENT MEMBERSHIP - The part time student membership fee is \$50. If you join between July 1st and August 31st, the dues are \$35 for the rest of the calendar year. If you join between, September 1st and December 31st, dues are \$65 for the rest of the current year and all of the following year. **To qualify for the part time student membership you must currently be taking between 6-11 credit hours per semester and submit proof with this application.** Student members receive all the benefits of membership with the exception of voting, eligibility for executive and professional certification, and cannot be a proxy for a chapter president at any national board meetings.

Retired Membership - The fee for retired members is \$50. To qualify for retired membership, an individual must be a National AAHAM member who has retired from healthcare. Retired members receive all benefits of membership with the exception of voting. To see if you qualify as a retired member, please contact that National Office.

If you are applying as a **Full Time Student Member**, please [click here to join online or download the correct membership application.](#)

Do something today that your future self will thank you for.

Join the thousands of other revenue cycle professionals that utilize the AAHAM network of peers to get answers to their questions and to strengthen their careers.

#AAHAMAlwaysInvestinYourself
 #AAHAMRaiseTheLevel

Please allow two weeks for processing after your application is received at the national office. Dues are not tax deductible as a charitable contribution, but may be as a business expense. Approximately 4% of your annual dues are used for lobbying activities and are non-deductible.

Please note: AAHAM's membership year is from January to December, it is not anniversary based. Membership is on an individual, not institutional, basis and is non-transferable.

How did you hear about AAHAM?

Colleague Publication Website LinkedIn

If referred by AAHAM member, please give their name:

Payment Method:

Check/Money Order (Make Payable to AAHAM)

Amex Visa MasterCard

Card Number: _____

Exp: _____ CVV2 Code: _____

Name as it appears on card: _____

Signature: _____

Billing Address for Credit Card:

PAYMENT TOTAL

NATIONAL DUES: _____

LOCAL DUES: _____

TOTAL ENCLOSED: _____



Local Chapters

AAHAM has over 30 chapters throughout the US and India. Local chapters offer you more opportunities for education and networking. Local chapters offer you more opportunities for education and networking, and offer both in person and webinar educational opportunities. In addition, local chapters offer a great opportunity to obtain an industry leading healthcare certification which provides exceptional value to students when seeking employment in the healthcare field. Please see the listing of local chapters below to help you decide which chapter you should belong to along with your national membership.

Name of Chapter	Geographic Location	Chapter Dues
Nebraska Aksarben #01	Nebraska	\$0.00
Florida Sunshine #03	Florida	\$40.00
Carolina #04	North & South Carolina	\$30.00
Washington Evergreen #05	Washington State, West of the Mountains	\$30.00
Minnesota Gopher #06	Minnesota	\$40.00
Iowa Hawkeye #07	Iowa	\$0.00
Missouri Hawthorn #08	Missouri	\$45.00
Illinois #09	Illinois	\$30.00
Washington Inland Empire #10	Washington State, East of the Mountains	\$25.00
Pennsylvania Keystone #11	Central Pennsylvania	\$25.00
Maryland #13	Maryland	\$25.00
Utah Mountain West #14	Utah	\$30.00
New Jersey #16	New Jersey	\$40.00
Ohio Western Reserve #18	Ohio	\$0.00
Northeast PA #19	North East Pennsylvania	\$30.00
Colorado Rocky Mountain #21	Colorado	\$20.00
Maine Pine Tree #22	Maine	\$25.00
North/South Dakota Rushmore #23	North & South Dakota	\$0.00
Western Region #26	Arizona and California	\$0.00
Virginia #27	Virginia	\$30.00
Philadelphia #29	Philadelphia, Pennsylvania	\$35.00
Georgia #33	Georgia	\$30.00
Connecticut #34	Connecticut	\$35.00
Pennsylvania Three Rivers #37	Pittsburgh, Pennsylvania	\$50.00
Texas Bluebonnet #40	Texas	\$50.00
Indiana #42	Indiana	\$25.00
Wisconsin #44	Wisconsin	\$25.00
Chennai #49	Chennai, India	\$0.00
Tennessee Music City #53	Tennessee	\$35.00
Vermont & New Hampshire Twin States #56	Vermont & New Hampshire	\$25.00
Massachusetts #57	Massachusetts	\$85.00

Please Check the Appropriate Codes in Each Category Below

Years in Healthcare:

0-5 6-10 11-20 21-25 25+

Certification:

CHAM (NAHAM) CHFP (HFMA)
 FHFMA (HFMA) CHCS (ACA)
 Other (please list)

Employer Type:

Billing
 Collection Agency
 Consulting
 Law Firm
 Outsourcing
 Provider
 Software/IT
 Vendor/Corporate Partner
 Other (please list)

Position:

CFO
 Consultant
 Director
 Executive Director
 Vice President
 Manager
 Patient Access Representative
 Partner, Principal, Owner
 PFS Representative
 Supervisor/Coordinator
 Other (please list)

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