



## **APPLICATION FOR CORPORATE MEMBERSHIP**

President  
Massachusetts Health Information Management Association  
P.O. Box 681  
Tyngsboro, MA 01879

Dear President:

We, \_\_\_\_\_, would like to become a Corporate Member for the coming year in the Massachusetts Health Information Management Association.

We understand the benefits are as follows: all Corporate Members will receive mailings and email notices about MHIMA happenings, including your quarterly electronic newsletter, E-Channel. Also, Corporate Members will be listed on a separate Vendor Page on the MHIMA website, [www.mahima.org](http://www.mahima.org) and will receive a link to their website and/or email address from the MHIMA Vendor Page. There is also a 25% Exhibitor Booth discount at the New England State Annual HIM Meeting, and a 25% discount on advertising opportunities on the MHIMA website, which will be available in August 2007.

We understand the Annual Dues are \$300 and that membership is for one year, June 1 through May 31.

Enclosed please find our check for \$300, made payable to MHIMA and our company information for the website.

Sincerely,

Signature:

Date:

## Company Information

Company Name:

Address:

City/State/Zip

Telephone Number:

Fax Number:

Website:

Email Address:

Contact:

Brief description of your business (2-3 sentences max).

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Please check the **category** that you wish to have your listing under on the Corporate Partners Page. Please choose only one category.

<b>Category</b>	
<input type="checkbox"/>	Associations
<input type="checkbox"/>	Charge Master Systems/Services
<input type="checkbox"/>	Clinical Information Systems
<input type="checkbox"/>	Coding Products/Services
<input type="checkbox"/>	Compliance
<input type="checkbox"/>	Consulting
<input type="checkbox"/>	Document Management
<input type="checkbox"/>	EHR Systems/Services
<input type="checkbox"/>	Filing Equipment/Systems
<input type="checkbox"/>	Imaging Solutions
<input type="checkbox"/>	Interim/Contract Management
<input type="checkbox"/>	Outsourcing
<input type="checkbox"/>	Recruitment/Job Placement
<input type="checkbox"/>	Reimbursement Services
<input type="checkbox"/>	Release of Information Services
<input type="checkbox"/>	Transcription Products/Services

Logos can be provided in an electronic format as a .gif, jpg, .png or .bmp file. The image should be 12KB or less. Please submit to Karen O'Donnell at [masshima@cs.com](mailto:masshima@cs.com).