



California Medical Group Management Association

New Member Application _____

2009 Membership Renewal _____

Name _____ Title _____

Company or Medical Group Name _____

Address _____

City, State, Zip _____

Work Phone _____ Fax _____ Email _____

Home Address _____ Home Telephone _____

City, State, Zip _____ County _____

No. of Providers (MD, DO, OD) _____

No. of Other Providers (PA, NP) _____

Organization type (check all that apply):

- Multispecialty
- Single Specialty _____
- Hospital Based
- IPA/Medical Group
- MSO
- Accountant
- Consultant
- Vendor
- Other _____

Are you a member of the American College of Medical Practice Executives (ACMPE?) Yes No

If "Yes", what is your present status? Nominee Certified Fellow

Job duties include (check all that apply):

- Office management including the development and establishment of office procedures
- Selection and direction of administrative personnel
- Selection and direction of technical personnel
- Requisition and purchase of equipment and supplies
- Direction of accounting and finances
- Administration of professional and public relations
- Other (specify): _____

CAMGMA is interested in providing seminars and continuing education programs that our members will find helpful and of interest. Are there any topics which you would like to see offered? _____

To better serve our members, we offer a combined membership. Join both the state and your region (specify region below). See reverse for category descriptions. Business partner membership and sponsorship options are listed at the bottom of this page.

Active & Regional

_____ \$100 **New** Combined California Active & Regional

_____ \$125 Combined California Active & Regional (1-2 members from same organization – per person/per year)

_____ \$112 Combined California Active & Regional (3+ members from same organization – per person/per year) **All members must renew at same time**

Region

_____ Inland Empire (San Bernardino, Riverside Counties)

_____ Los Angeles (Los Angeles County)

_____ No. California (Santa Cruz, Monterey, Santa Clara, San Mateo, San Francisco, Marin, Napa, Contra Costa, Alameda, San Benito, Mendocino, Lake Sonoma Counties)

_____ Orange County (Orange County)

_____ Sacramento (Sacramento, Solano, Yolo, Yuba)

_____ San Diego (San Diego County)

_____ Central Valley (Stanislaus, San Joaquin, Tuolumne, Calaveras, Merced, Kern, Fresno, Mariposa Counties)

If referred by CAMGMA member, please list member name _____

Business Partners – CAMGMA welcomes business partner participation and sponsorship and offers multiple opportunities for interested companies

Membership

_____ \$200 Combined California Associate & Regional

Sponsorship Options (for complete details: www.camgma.com/vendors.php)

_____ \$1,000 Gold – membership + logo & link on CAMGMA website & director

_____ \$800 Silver – membership + listing on CAMGMA website & directory

_____ \$600 Bronze – membership + listing in CAMGMA directory

Annual Conference Exhibiting & Sponsorship

_____ \$3000 per Booth (includes two (2) Reps

___ \$295 Additional Rep

Annual Conference Sponsorships start at \$3,000



California Medical Group Management Association

Active Member

An Active Member is currently employed in an executive, managerial or administrative capacity of a medical group engaged in the practice of medicine as a legal entity sharing business management facilities, records and personnel and/or serves in an executive, managerial or administrative capacity of an integrated delivery organization that includes, as part of its primary mission, the provision of physician services and administration of physician practices.

An Active Member is entitled to all Association membership services, including the right to vote on all matters and, if the criteria as stated in Article V of the bylaws is met, to serve as an officer of the Association.

Associate Member

An Associate Member is any person conducting a business consulting service whose principal practice is directed toward assisting and advising physicians on medical practice management issues, and therefore, does not qualify for Active membership. Associate membership may be granted to persons interested in supporting this Association, its goals and activities and who are not members of any organization whose interests are in conflict with the purpose of this Association

An Associate Member will be a nonvoting member of the Association and cannot hold office, but may serve on committees at the discretion of the Board of Directors.

Honorary Member - Complimentary

Honorary membership may be conferred upon an active member who has disassociated from medical group administration. Honorary membership shall be conferred only if, in the judgment of the Board of Directors, such member has rendered outstanding service to this organization or to the profession of medical group administration.

Life Member

A Life Member is a CAMGMA member who permanently retires from group practice administration. The member must have been an Active Member for at least fifteen (15) years to qualify.

Enclosed is my payment for \$_____

Check

Check # _____

Credit Card

Card Type: MC _____ Visa _____ AmEx _____

Card # _____ Ex. _____

Name on Card _____
(Please Print)

CV# _____ (3-digit number on back of Visa, MasterCard; 4 digit number on front of AmEx)

Cardholder Address _____

City, State, Zip _____

Signature of Cardholder _____

Please mail or fax to:
California Medical Group Management Association

10221 N 32nd St Ste D

Phoenix, AZ 85028

602-996-2330 Fax

Website: www.camgma.com

Questions regarding membership may be directed to:

CAMGMA (800) 853-8787

camgma@scltd.biz