

**Massachusetts State Association of PACE Programs
Affiliate Application**



Company Information

Company Name:		
Address:		Suite/Floor:
City:	State/Country:	Zip:
Website:		
Company Phone: (For directory listing)		Company Email: (For directory listing)
Contact Name:		Contact Title:
Contact Phone:		Contact Email:

Professional Information

Check the profession that you represent:

- | | | |
|---|---|---|
| <input type="checkbox"/> Accountant | <input type="checkbox"/> Food Service Company | <input type="checkbox"/> Nonprofit/Government |
| <input type="checkbox"/> Architect | <input type="checkbox"/> Insurance Provider | <input type="checkbox"/> Pharmacy |
| <input type="checkbox"/> Bank | <input type="checkbox"/> Law Firm | <input type="checkbox"/> Rehabilitation Services Provider |
| <input type="checkbox"/> Consultant | <input type="checkbox"/> Medical Product Provider | <input type="checkbox"/> Transportation Services Provider |
| <input type="checkbox"/> Electronic Medical Record Provider | <input type="checkbox"/> Medical Service Provider | <input type="checkbox"/> Other: _____ |

Briefly describe your product or services: _____

Does your organization currently offer these products or services to PACE organizations? _____

Annual Dues - \$2,500 (per EIN)

EIN: _____

Payment

Submit full payment of your Affiliate dues. Dues are non-refundable and non-transferable. Dues are not a tax-deductible donation, but may be eligible as a business expense deduction.

- Check (Payable to MassPACE) # _____
- Please bill my organization for the membership fee of \$ _____

Terms & Conditions

Designation as a MassPACE affiliate is available to organizations/professionals that are interested in the objectives of MassPACE and provide or offer products or services to our members and must not be an excluded organization from participation in state or federally funded programs. To be considered for designation as a MassPACE Affiliate, an interested organization must complete the MassPACE Affiliates application. Following Board approval of the application, membership will begin when payment in full is made by the Affiliate. Organizations designated as MassPACE Affiliates may use the MassPACE Affiliate name and/or logo in accordance with MassPACE marketing guidelines. The MassPACE board reserves the right to terminate a designation of any organization that does not comply with the policies and requirements governing the MassPACE Affiliate program. Determination of the board are final.

- I agree to abide by the MassPACE policies governing MassPACE Affiliates.

Signature:	Date:
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Please remit application and payment to:
MassPACE, P.O. Box 517, Wenham, MA 01984
Questions? Please send an email to info@masspace.net or call (978) 580-1679