

Please mark the PMG you wish to join.			
□ SC Chapter of American Society of Healthcare Risk Management (SCASHRM+AHQ)			
☐ SC Healthcare Human Resources Association (SCHHRA) ☐ SC Organization of Nurse Leaders (SCONL) ☐ SC Society for Healthcare Emergency Management (SCSHEM)			
		☐ SC Society for Hospital Fund Development (SCSHFD)	\$80
		☐ SC Society of Chaplains (SCSC)	\$80
☐ SC Society of Hospital Directors of Volunteer Services (SCSH	HDVS) \$80		
□ SC Society of Hospital Engineers (SCSHE)	\$80		
☐ SC Society of Healthcare Supply Chain (SCSHSC)	\$80		
□ Student Membership*	\$40.00 per student, per PMG		
* Must be full time student at an academic institution, enrolled full-time, must subrand is subject to approval by PMG Board. Student membership can be revoked a school part-time are not eligible for student membership, but are eligible for regu	at anytime. Note: Employees working full-time & attending		
NameTitle			
Organization			
Work Address			
City S	tate Zip Code		
Email			
PhoneFax			
Signature	Date		
Payment Options Please check one form of payment.			
	_ 0.15014		
□ CREDIT CARD			
Please charge my: □ Visa □ MasterCard □ American	Enclosed is a check in the amount of		
Express	\$ All checks should be made		
Card no	payable to SCHA, and returned with this form to:		
Security code Expiration date	this form to.		
Signature	South Carolina Hospital Association		
Name as it appears on card	Attn: Accounts Payable 1000 Center Point Road		
Billing address and zip code of card	Columbia SC 29210		