



VIRGINIA ASSOCIATION OF DURABLE MEDICAL EQUIPMENT COMPANIES
2010 membership application

Company Name: \_\_\_\_\_ Year Established: \_\_\_\_\_
Parent Company Name: \_\_\_\_\_
Address: \_\_\_\_\_ Phone: \_\_\_\_\_
City, State, Zip: \_\_\_\_\_ Fax: \_\_\_\_\_
Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_
Accrediting Body: \_\_\_\_\_ E - mail \_\_\_\_\_ (required)

Regular Member [ ] Corporation [ ] Partnership [ ] Sole Proprietor [ ] Hospital Owned

Associate Member [ ] Manufacturer/Distributor/Service Provider/Vendor

Indicate the Services Provided:

- 1. [ ] Home Equipment Rental and Sales
2. [ ] Retail Sales
3. [ ] Ostomy
4. [ ] Mastectomy
5. [ ] Custom Chair & Seating
6. [ ] Enteral/Parenteral
7. [ ] Home IV Services
8. [ ] Ambulance Service
9. [ ] Oxygen
10. [ ] Other Respiratory Services
11. [ ] Ventilators
12. [ ] Orthotics
13. [ ] Wholesale Supplier
14. [ ] Pharmacy
15. [ ] Home Health Agency
16. [ ] Other

Member of: [ ] AAH [ ] MED [ ] RESNA [ ] VAHC [ ] OTHER
Accredited by: [ ] JCAHO [ ] CHAPS [ ] ACHC [ ] Compliance Team [ ] OTHER
Billing: [ ] Computerized [ ] EMC [ ] DMERC: A [ ] B [ ] C [ ] D [ ]

Table with 2 columns: Membership Category and Amount. Rows include 2010 Dues (Up to \$500,000 Gross Revenue) and REGULAR (\$500,000 to \$1,000,000, \$1,000,000 to \$2,000,000, Over \$2,000,000).

ASSOCIATE/MANUFACTURER\*

[ ] Manufacturer/Distributor/Service Provider..... \$395.00

(Vendor space at Summer Trade Show for 2010 will be acquired separately - cost not to exceed \$500 per booth)

Please mark correct block and enter amount here..... \$\_\_\_\_\_
(Please attach each branch address and contact information)

Total Due \$\_\_\_\_\_\*\*

(\* Vendor Sponsorship packages available online. \*\*Membership based on calendar year - you may pro rate by month)

I hereby apply for VADMEC membership and agree to abide by the Constitution and Bylaws of the Association.

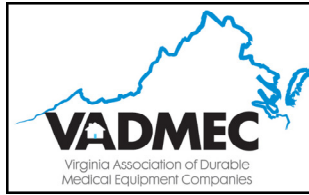
Signature \_\_\_\_\_, Title \_\_\_\_\_, Date \_\_\_\_\_

Up to 24% of dues can be devoted to legislative activities and therefore, not deductible as business expenses.

PLEASE MAIL APPLICATION ALONG WITH PAYMENT TO:
(credit cards are accepted)

VADMEC, PO BOX 4411, CARY, NC 27519-4411. www.vadmec.org

QUESTIONS? CALL 919-387-1221 OR EMAIL yadmec@nc.rr.com. Fax 919-387-4255



# Virginia Association of Durable Medical Equipment Companies

## Benefits which 2010 VADMEC Members receive:

- Reduced rates for **two General Meetings** with the highest in quality programming and entertainment  
**Winter Meeting – February 10-12, 2010**, - held at the Omni Richmond, **Summer Meeting and Exhibit Show 2010 – August 3-5, 2010**, - held at the Hilton Virginia Beach Oceanfront.
- Reduced rates for **Educational Seminars** held in the state's center (Roanoke or Richmond) during the Spring and the Fall which are usually one-day, in-depth instruction. **2010 Schedule** will include a sessions on: Management/Operations Focus, Accreditation & Reimbursement trainings, Driver Certification Training Program, Sales/Marketing and Personnel Training.

### **Lobbying power - both in Virginia & Washington:**

2009 included two large grassroots lobbying trips to DC to work to halt Competitive Bidding. Committees hold meetings with other payors to ensure proper attention to reimbursement VADMEC visits our VA delegation in DC each year and has a General Assembly visits at each Winter Meeting.

- **Emailed news** - with committee reporting from our committees as activity warrants, with the latest industry updates and advertising opportunities for Associate Members
- **Committees:** Legislative - State & Federal, Education & Programming, Private Insurance, Membership, Medicare, Medicaid, Rehab, Ethics
- Guidance in **grassroots lobbying** campaigns and on-site visits by your elected officials
- **VADMEC Membership Directory**, By Laws, Code of Ethics, Patient Bill of Rights, Caregiver Bill of Rights accessible online and in pdf form.
- **VADMEC Membership Certificate** suitable for framing
- **Informal networking** with other VADMEC members
- Up to the minute **E-mail** communications, updates and more!!

Close association with the American Association for Homecare and many other affiliated industry associations, state and national  
VADMEC – Representing the Durable Medical Equipment Companies in Virginia 1979!!



**Virginia Association for Durable Medical Equipment Companies**  
P.O. Box 4411, Cary, NC 27519-4411  
Phone: (919) 387-1221, Fax: (919) 387-4255  
[www.vadmec.org](http://www.vadmec.org)

**CREDIT CARD CHARGE AUTHORIZATION FORM – FAX to 919-387-4255**

**The credit card form must be filled out completely, or payment will be declined and not processed.**

Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_



(CIRCLE CARD TYPE or write choice here \_\_\_\_\_)

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ V-Code (3 digits) \_\_\_\_\_  
(Back of card, Amex is 4-digit code on front of card)

Name on Credit Card: \_\_\_\_\_

Billing Address of Credit Card: \_\_\_\_\_

Charge Amount \$ \_\_\_\_\_ Item Purchased: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Merchant Services Provided by: Atlantic Merchant Services - (877) 947-1800 for info