## Business Partner Application

### New Member Information:

<table>
<thead>
<tr>
<th>Organization Name:</th>
<th>Telephone Number:</th>
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<tr>
<td>Address:</td>
<td>Fax Number:</td>
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<td>Primary Contact:</td>
<td>Email Address:</td>
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<td>Title:</td>
<td>Organization Website:</td>
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<td>Facebook Page:</td>
<td>Twitter Page:</td>
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<td>LinkedIn Page:</td>
<td>Instagram Page:</td>
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### New Member Profile:

**Business Description:**

________________________________________________________________________

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### Products and Services Your Company Provides (please check all that apply):

- [ ] Accounting/Financial Services
- [ ] Human Resource Services/Development
- [ ] Medical Services
- [ ] Pest Control
- [ ] Pharmaceutical Companies
- [ ] Portable Imaging
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Architectural Services
- [ ] Incontinent Supplies
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Capital Equipment
- [ ] Interior Design & Decorating
- [ ] Pest Control
- [ ] Pharmaceutical Companies
- [ ] Portable Imaging
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Clothing
- [ ] Lab Services
- [ ] Medical Equipment
- [ ] Medication
- [ ] Pharmaceutical Companies
- [ ] Portable Imaging
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Computer Products/Software
- [ ] Laundry
- [ ] Medical Services
- [ ] Medication
- [ ] Pharmaceutical Companies
- [ ] Portable Imaging
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Contractor/Construction Management
- [ ] Legal Services
- [ ] Medical Services
- [ ] Medication
- [ ] Pharmaceutical Companies
- [ ] Portable Imaging
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Dietary/Food Management
- [ ] Management/Consulting
- [ ] Medical Services
- [ ] Medication
- [ ] Pharmaceutical Companies
- [ ] Portable Imaging
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Education/Training
- [ ] Marketing Services
- [ ] Medical Services
- [ ] Medication
- [ ] Pharmaceutical Companies
- [ ] Portable Imaging
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Employee Benefits
- [ ] Management/Consulting
- [ ] Medical Services
- [ ] Medication
- [ ] Pharmaceutical Companies
- [ ] Portable Imaging
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Group Purchasing
- [ ] Medical Services
- [ ] Medication
- [ ] Pharmaceutical Companies
- [ ] Portable Imaging
- [ ] Professional/Trade Association
- [ ] Rehabilitation Services/Products
- [ ] Staffing/Workforce
- [ ] Telecommunication Systems
- [ ] Telehealth
- [ ] Transportation
- [ ] Wound Care
- [ ] Other

### Contacts: Please list all organization representatives to receive email communications (attach additional names if necessary)

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<thead>
<tr>
<th>Name:</th>
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Business Partner Application

Terms of Membership:
Businesses or organizations that become associate members of Care Providers of Minnesota may also become members of the American Health Care Association (AHCA). Care Providers of Minnesota does not require Business Partners to belong to AHCA. Care Providers of Minnesota membership continues until such membership is terminated, in writing, by either the member or Care Providers of Minnesota. This category of membership does not provide voting or office holding privileges.

Dues or gifts to Care Provider of Minnesota are not deductible as charitable contributions for federal tax purposes. Dues may be deductible as ordinary business expenses subject to restrictions of Internal Revenue Code sections 6033(e) and 162(e)(1). Care Providers of Minnesota estimates that 20.16% of your 2020 Care Providers of Minnesota dues will be for lobbying activities and not deductible for federal tax purposes.

The Bylaws of Care Providers of Minnesota mandate that all eligible institutional facilities that are affiliated with a Business Partner, even if separate corporations, be members of Care Providers of Minnesota. Any affiliated institutional member which has affiliated apartments or home health agencies may, at its option, also bring these into membership using a separate application form.

We hereby agree to abide by the relevant Standards and Policies of Care Providers of Minnesota. New member applicants are subject to approval by Care Providers of Minnesota’s Board of Directors. The board may, at any time, suspend or terminate membership of a Business Partner failing to meet the standards set forth in Care Providers of Minnesota’s Articles of Incorporation, Bylaws, and relevant board policies. Membership dues are set as determined according to bylaws and are payable according to the policies and procedures of Care Providers of Minnesota. Business Partner categories and rates are indicated below. All dues are per twelve (12) month period of membership. Please check the appropriate category for applicant organization.
Prepayment of the first year’s dues is required at the time of application. Subsequently, annual dues will be billed at the end of the 12-month membership.

Select Membership Class: Payment:
☐ Tier I Business Partner ($1,195) ☐ Check (payable to Care Providers of Minnesota)
☐ Tier II Business Partner ($495) ☐ Credit Card: (Visa, Master Card, or AMEX)
☐ Allied Groups/Organization Member ($295) To pay by credit card contact us at 952-851-2493

By signing this form, the undersigned verifies the information in this membership application is correct and agrees to the terms and conditions set forth above.

Authorized Signature: Title:
Printed Name: Date:

Please return completed application to: Care Providers of Minnesota 7851 Metro Parkway, Suite 200 Bloomington, MN 55425 Fax: 952-854-6214

For office use only: BP – CPID # ______________ Accounting Dept: _____________
TIER I BUSINESS PARTNER MEMBER $1,195 annually

A Tier I Business Membership provides a wealth of benefits that connect you with other Association members through events and activities tailored to your specific business needs. In addition to regular communication that lets you know what’s happening within your Association and in long-term care on a state and national level, valuable opportunities are offered throughout the year to Tier I Business Partners that provide exclusive access to decision-makers.

**Membership Benefits**

- Invitation to attend the January or September Board of Directors Retreat, with networking time with the Board of Directors (limited to the first 20 to respond)
- Special invitation to attend the Region Forum—including an opportunity to talk with attendees
- Opportunity to participate in Care providers of Minnesota Scholarship presentations
- PRIORITY Convention booth location
- Discounted rate at Care Providers of Minnesota education programs and webinars
- Invitation to sponsor the six Board of Directors meetings and retreats, along with NEW Executive Committee meetings
- Invitation to attend and sponsor Day at the Capital
- One company-promotional article printed in ACTION annually

**Additional Annual Benefits**

- Complete membership electronic mailing list for your business marketing needs (upon request)
- Ad tiles to appear in three issues of ACTION (a $300 value)
- The opportunity to have one article placement in the newsletter to promote your company, product, or service, plus unlimited opportunities, to submit for publication consideration, profession-appropriate news and information
- Listing in the Association’s annually published Membership Directory including your product/service description
- Access to the Members-Only section of Care Providers of Minnesota’s website; full of useful information and resources
- ACTION Newsletter delivered to you electronically: the Association’s informative and to-the-point weekly electronic newsletter
- Online Membership Directory listing
- Personalized and custom services; access to staff with extensive experience in public affairs, public relations, research, education, legal, and regulatory issues
- Opportunity to participate on Association Committees and Task Forces

PLUS, a $500 discount on your Convention booth and a $250 Senior Housing & Home Care Summit table discount
A Tier II Business Membership gives you a year-round presence with Care Providers of Minnesota members and daily information from your Association to help you make solid decisions for your business.

**Membership Benefits**
- Listing in the Association’s annually published Membership Directory including your product/service description
- Online Membership Directory listing
- Access to the Members-Only section of Care Providers of Minnesota’s website, full of useful information/resources
- Complete membership electronic mailing list for your business marketing needs (one-time use)
- ACTION Newsletter delivered to you electronically: the Association’s informative and to-the-point weekly electronic newsletter
- Personalized and custom services; access to staff with extensive experience in public affairs, public relations, research, education, legal, and regulatory issues
- Opportunity to participate on Association Committees and Task Forces

PLUS a $200 discount on your Convention booth and a $150 Senior Housing & Home Care Summit table discount

**ALLIED GROUPS/ORGANIZATION MEMBER**

Defined as an organization not eligible for other membership categories and not primarily engaged in the sale of goods and services but wishing to maintain a relationship with the long-term care industry.