



# OHIO ASSISTED LIVING ASSOCIATION

1335 Dublin Road, Suite 206-A, Columbus, Ohio 43215 (614) 481-1950 FAX (614) 481-1954  
[www.ohioassistedliving.org](http://www.ohioassistedliving.org)

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## Membership Application

Provider Membership- This membership is for communities actively providing assisted living services. Membership is by *individual* community, not company and dues are based on the number of Assisted Living Apartments of each community. Membership minimum is \$250 per community.

Pending New Licensure/ Under Construction -\$350

Community Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

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

Contact Title: \_\_\_\_\_ Company Website: \_\_\_\_\_

**Name of Owner/Management Firm:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

**Number of Assisted Living Apartments:** \_\_\_\_\_ x \$13.00 + \$75= Total Dues \$ \_\_\_\_\_

All Memberships with the Ohio Assisted Living Association are annual but can be prorated during the first year of membership. Select your membership category and complete your registration. If you have questions, please contact our office at 614-481-1950. Mail completed registration, along with check made payable to OALA to **The Ohio Assisted Living Association, 1135 Dublin Road, Suite 206A, Columbus, Ohio 43215. You may also charge your membership to Visa/ MasterCard/ American Express:**

Account # \_\_\_\_\_ Exp: \_\_\_\_\_ CVC Code \_\_\_\_\_

Billing Address of Card (*if different from community*): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature: \_\_\_\_\_ Print: \_\_\_\_\_