Individual Consortium Membership Agreement



Lowcountry Area Health Education Center, Inc. (AHEC) 87 Academy Road Walterboro, SC 29488 Phone (843) 782-5052 Fax (843) 782-5053 www.lcahec.com

Individual Consortium member benefits include attendance at Lowcountry AHEC sponsored live continuing education programs, AHEC U Online continuing education programs, and SCHOOLS Videoconference programs at no charge for registration. Meals, books, and other additional fees, if required for a special program are not included in consortium membership. Any additional fees are indicated in the fee section of an individual program's email marketing and under website course details. Consortium benefits do not include ACLS, BLS, PALS, or co-sponsored programs.

Consortium membership is not transferable and membership fees are non-refundable. Please complete the form below and enclose payment of \$200 with your membership application. Membership fee for July 1, 20__ – June 30, 20__ is \$200.00 and may not be prorated.

First Name: _	
Middle Initial:	
Last Name: _	
Address: _	
City:	
State: _	
Zip:	
Gender: _	
Hispanic/Latino (Please Circle): YES or NO	
Asia Blac Nat	ck or African American ive Hawaiian or other Pacific Islander
Blac	ck or African American ive Hawaiian or other Pacific Islander

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Date of Birth:
(mm/dd/yyyy)
Cell/Home Phone:
Work Phone:
E-mail:
Employer:
Employer County:
Title:
Health Profession Discipline:
For Office Use Only Consortium membership effective (start date)to Payment received: