

PALA Associate Membership Application

PALA associate membership is available to individuals or agencies interested in advocating for personal care and assisted living in Pennsylvania. They are not associated with an Assisted Living Residence or Personal Care Home in the state. This membership also includes; retirees, government agencies, students, and those planning to open an Assisted Living Residence or Personal Care Home.

Name _____ Title _____

Employer _____

Business Description _____

Below address is: Home Address Business Address

Address _____

City, State, Zip _____

Email _____ Phone _____

PALA membership is an annual fee of \$100.00

Please complete this form and send with payment to: FAX: 717-695-9735 EMAIL: info@pala.org

MAIL: PALA 105 North Front St. Suite 106 Harrisburg, PA 17101

Payment Method: Check # _____

Credit Card Payment Visa MasterCard American Express Discover

Credit Card Number _____ Exp _____ CVV _____

Name on Card _____ Billing ZipCode _____