



PENNSYLVANIA ASSISTED LIVING ASSOCIATION

PALA Industry Partner Membership Application

PALA industry partner membership is available to an organization the provides goods or services to personal care and assisted living communities.

Company _____

Contact Person _____

Address _____

City, State, Zip _____

Email _____ Phone _____

Website: _____

Description of Product/Industry _____

PALA's Industry Partner rate is just a flat \$600 for 12 months membership

Membership Benefits Include:

Opportunity to sponsor special events at the Conferences

Opportunity to directly offer your services and products at Conference Vendor Expositions

Discounted rates for Vendor Expositions and Conferences

FREE advertising on our PALA website

Access to PALA's Membership list consisting of Assisted Living Residences and Personal Care Homes

Please complete this form and send with payment to: FAX: 717-695-9735 EMAIL: info@pala.org
MAIL: PALA 205 Grandview Ave., Suite 406 Camp Hill, PA 17011

Payment Method: Check # _____

Credit Card Payment Visa MasterCard American Express Discover

Credit Card Number _____ Exp _____ CVV _____

Name on Card _____ Billing ZipCode _____