LeadingAge®
Connecticut & Rhode Island

Business Affiliate Membership Application

United as one association, LeadingAge Connecticut & Rhode Island has strengthened the resources and opportunities available to our partners. Business Affiliates gain access to a larger regional membership community, expanded visibility, and enhanced opportunities for meaningful engagement across both states.

Please fill out the following information and return to LeadingAge Connecticut & Rhode Island.

Company Information

Name of Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Website: _____

Company Description:

_____

_____

_____

Contact Person

Name: _____ Title: _____

Email: _____

Please note that your listing in our Membership Directory will read as printed above.

Does the company have an ownership interest in a long-term care provider facility or senior housing facility in Connecticut, Rhode Island or any other state? Yes: _____ No: _____

If yes, please explain the relationship.

_____

_____

Does the company have a management contract with a long-term care provider facility or senior housing facility in Connecticut, Rhode Island or any other state? Yes: _____ No: _____

If yes, please explain the relationship.

_____

_____

Has your company ever had a health care or business license revoked or been sanctioned or excluded under any state or federal health care program? Yes: _____ No: _____

If yes, please explain (use additional pages as needed).

_____

_____

_____

LeadingAge Connecticut & Rhode Island
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Membership Dues: $750

THANK YOU FOR YOUR APPLICATION