

North Carolina Business Group on Health



Promoting a better healthcare delivery system
Advocate. Innovate. Educate.

NCBGH Membership Application

Please enter **ALL** of the information indicated below.

By entering my personal information, I consent to receive email communications from the survey author's organization based on the information collected.

First Name:	<input type="text"/>
Last Name:	<input type="text"/>
Job Title:	<input type="text"/>
Company Name:	<input type="text"/>
Work Phone:	<input type="text"/>
Email Address:	<input type="text"/>
Address 1:	<input type="text"/>
Address 2:	<input type="text"/>
City:	<input type="text"/>
State/Province (US/Canada):	<input type="text"/>
Postal Code:	<input type="text"/>

Number of employees in North Carolina:

Number of employees in United States:

Number of International employees:

Please provide us with a brief description of your company's products/services/mission

Membership requires the member to be employed by a North Carolina-based company with at least 25 employees in NC and to be in the company's human resources and/or finance department(s). General membership dues are \$100 per year* and entitles the organization two (2) seats at the general membership meetings. The NCBGH Board reserves the right to accept or reject membership. Board reviews/sets membership dues annually and reserves the right to change these fees without notice.