



www.tahu.org

MEMBERSHIP APPLICATION

Texas Association of Health Underwriters/TAHU

Phone: 713.645.1490 Email: admin@tahu.org

Please mail this form with a check payable to NAHU:
312 North Avenue East, Suite 5, Cranford, NJ 07016
or fax it with credit card payment information to 908.967.5044

This Membership Application for the National Association of Health Underwriters includes membership in the Texas Association of Health Underwriters and a local chapter of the TAHU.

Name/Designation: _____ Title: _____

Company: _____ Business Address: _____

City, State, Zip: _____ Telephone: _____

Fax: _____ Email: _____

Referral Sponsor: _____

Home Address: _____ City, State, Zip: _____

Cell Phone: _____ Personal Email: _____

ANNUAL MEMBERSHIP DUES: (Membership Year begins on the date your application is processed.)

Local Dues: (See List)
State Dues - Texas: \$120
National Dues - TAHU: \$338

TOTAL DUES PAYMENT: \$ _____

PLEASE SELECT THE TAHU CHAPTER THAT IS CLOSEST TO YOU:

- | | | |
|---|--|--|
| <input type="checkbox"/> Austin: \$25 | <input type="checkbox"/> Coastal Blend: \$15 | <input type="checkbox"/> Dallas: \$35 |
| <input type="checkbox"/> East Texas: \$25 | <input type="checkbox"/> El Paso: \$20 | <input type="checkbox"/> Fort Worth: \$25 |
| <input type="checkbox"/> Houston: \$65 | <input type="checkbox"/> Lubbock: \$30 | <input type="checkbox"/> Panhandle: \$25 |
| <input type="checkbox"/> San Angelo: \$25 | <input type="checkbox"/> San Antonio: \$30 | <input type="checkbox"/> South Texas: \$20 |
| <input type="checkbox"/> Texoma: \$37 | <input type="checkbox"/> West Texas: \$25 | |

PLEASE MARK THE BOX OR BOXES FOR THE AREAS OF YOUR PRACTICE:

- | | | | | |
|---|---------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Long-Term Care | <input type="checkbox"/> Managed Care | <input type="checkbox"/> Large Group | <input type="checkbox"/> TPA | <input type="checkbox"/> Medicare Supplement |
| <input type="checkbox"/> Disability | <input type="checkbox"/> Individual | <input type="checkbox"/> Small Group | <input type="checkbox"/> Self-Insured | |

MEMBERSHIP STATUS

- | | | |
|--|--|---|
| <input type="checkbox"/> I am a first-time member. | <input type="checkbox"/> I am renewing a membership. | <input type="checkbox"/> I am a former member rejoining the TAHU. |
|--|--|---|

PAYMENT OPTIONS: (You may opt to pay the entire fee with a check or credit card OR select monthly bank draft.)

- Bank Draft Authorization - Please attach a blank voided check.
- I (we) hereby authorize the National / Texas Association of Health Underwriters (NAHU/TAHU) to initiate debit entry in the **monthly amount** of \$ _____: charging my checking account as described on the accompanying voided check. This authorization is to remain in force until NAHU/TAHU has received written notification from me of its termination in such time and manner as to afford NAHU/TAHU and my depository reasonable opportunity to act upon it.

Your Signature: _____ Date: _____

- Check - Please make Checks payable to NAHU (Annual Dues Only)
- Credit Card: Mastercard Visa American Express

Name: (as it appears on the credit card) _____

Card Number: _____ CVV: _____ Expiration Date: _____

Billing Address: _____

Amount Due: _____ Monthly (1/12th of annual) Annual

Your Signature: _____ Date: _____

This authorization is to remain in force until NAHU/TAHU had received written notification from me of its termination.
I authorize Association Headquarters to charge my credit card for the amount shown above.



Texas Association of Health Underwriters

Benefits of Membership

Health Insurance Underwriter Magazine: Published monthly by the Nat'l Association of Health Underwriters.

TAHU News Magazine: Published quarterly by the Texas Association of Health Underwriters.

Local Newsletters: Published as determined by your Local Association of Health Underwriters.

Discounted CE Courses, as available. (Usually 15 hours per year)

Discounted E&O Coverage, as available.

Quality luncheon meetings with great speakers, discussing pertinent industry topics.

Networking – Where members can meet and learn from others in the industry.

Capital Conference in Washington, D.C., Day at the Capitol in Austin.

Local Association events such as: Golf Tournaments, Casino Nights and Award Banquets.

Reduced rates for the National and the Texas Association of Health Underwriter's Annual Conventions.

Legislative Activities

Your Association is committed to the ongoing vigilance in the legislative arena. TAHU strives to preserve Free Enterprise in the health care industry because it is the most cost effective way to delivery healthcare to our clients. TAHU makes every effort to keep up to date on activities in Austin, as well as in Washington, D.C. To this end, TAHU has dedicated significant effort by its Board of Directors – to assist in current political issues. Your TAHU Board of Directors includes individuals responsible for: State and National Legislative Issues, Legislative Communication and Programs, Legislative Regulatory Issues.

TAHU remains active in educating our Texas Legislators and Regulators regarding industry issues. Our full-time advocates in Austin and Washington, keeps us informed on legislation and political activity, allowing us to respond with calls and letters when needed. TAHU keeps legislators and regulators posted on the impact that their statutes and regulations have on the consumer and the industry in general. Finally, through TAHUPAC, you have the ability to contribute to state legislators' campaigns, who give support to the preservation of the health insurance industry and the role of the agent in that system.

"Every person owes a part of their time and money to the business or industry in which they are engaged. No person has a moral right to withhold their support from an organization that is striving to improve conditions within their sphere" - Theodore Roosevelt

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