



WSHSC Membership Application

SAFETY COUNCIL

The Washington State Healthcare Safety Council (WSHSC) <http://www.wahealthcaresafety.org/> was created as a mechanism to provide an opportunity to **network** among safety professionals in healthcare, keep abreast of the ever-changing and evolving **rules and regulations**, enhance **learning** and **professional development**, and **exchange ideas and programs** which have been proven to be successful. We invite you to join or renew your membership in the WSHSC!

Your membership with WSHSC allows you to take advantage of meetings and educational programs provided throughout the State. These seminars are periodically scheduled throughout the year on topics related to healthcare safety and are **FREE** to members. In addition, your membership enables you to participate in individual and organizational recognition awards. For a *nominal fee*, your organization can stay connected and current with safety standards, resources, and professional development!

Dues are based on number of employees per organization (not FTEs) and apply to the calendar year. A facility is defined by the scope of its business license and shall include any affiliated clinic. Umbrella organizations are defined by the scope of its business license, whose comprised membership may join the WSHSC and thereby accord simultaneous membership in the WSHSC for all of its constituents.

<input type="checkbox"/>	Category I	< 100 employees	\$50.00
<input type="checkbox"/>	Category II	100 – 2000 employees	\$100.00
<input type="checkbox"/>	Category III	2001-4000 employees	\$150.00
<input type="checkbox"/>	Category IV	4001 - 5000 employees	\$200.00
<input type="checkbox"/>	Category V	> 5000 employees	\$300.00

Please make checks payable to the Washington State Healthcare Safety Council (WSHSC), and send with this completed membership application to our Treasurer:

Jean Borth, Regulatory & Accreditation Manager
 Valley Medical Center: MS MAC 140
 Box 50010
 Renton, WA 98058-5010

Email: Jean_Borth@valleymed.org

*Please email Jean if you require a W-9 Taxpayer Identification Number (TIN) for payment.

Organization			
Address			
Contact Name			
Title			
Telephone Number		Fax Number	
EMAIL Address			
Is it okay to share this information with other WSHSC members?			YES <input type="checkbox"/> NO <input type="checkbox"/>
Is it okay to share this information other professional healthcare organizations?			YES <input type="checkbox"/> NO <input type="checkbox"/>

For membership questions, email Judith Davies at jbdavies@fredhutch.org or call 206-667-5785