Application for Affiliated Society Membership
Ohio Hospital Association
155 E. Broad Street, Suite 301
Columbus, Ohio  43215
Phone (614)221-7614  www.ohiohospitals.org

SOCIETY FOR OHIO HEALTHCARE ATTORNEYS
(Please Print or Type)

Name: ___________________________________________________

Professional designations:  □ JD  □ Esq.  □ RN  □ BSN  □ MPH  □ CPHRM  Other:______________

Position/Title: _______________________________________________________

Organization: _______________________________________________________

Business Address: _______________________________________________________

City:__________________________  Zip Code: _____________  County __________________________

Email ________________________________  Phone: ___________________________________

Your Signature: ________________________________  Date: _____________________

Type C membership is available to persons associated with an OHA organizational member or corporate partner.
See page 2 for membership requirements.
Membership dues are pre-paid by OHA member hospitals.

Please complete the following when submitting this application:

I am associated with ____________________________ Hospital in ____________ , Ohio, as: (Check one)

___ Employee (administrator, executive staff, in-house attorney, other: _________________________
___ Board Member
___ Outside Counsel
___ Other (please specify) ______________________________________________________

**Membership is pending verification of relationship with hospital leadership**

PLEASE RETURN APPLICATION TO:

Ohio Hospital Association
155 East Broad St., Suite 301
Columbus, OH 43215
OR

Email to: cindy.stump@ohiohospitals.org
SOCIETY FOR OHIO HEALTHCARE ATTORNEYS
OF THE OHIO HOSPITAL ASSOCIATION

PURPOSE
The purpose of the Society for Ohio Healthcare Attorneys is to advance the field of law by:
* Providing a forum for the exchange of information among attorneys serving Ohio hospitals.
* Presenting relevant educational programs.
* Monitoring emerging legal issues and developing case law pertaining to Ohio healthcare.

ORGANIZATION
Leadership in SOHA is provided by a 12-member executive board. The board consists of the president, immediate past president, vice president, secretary and two regional representatives from each of the four OHA districts. Attorneys employed by the Ohio Hospital Association serve as support staff to the society.

MEMBERSHIP ELIGIBILITY
Active personal membership is the only classification of membership in SOHA. To qualify, an individual must be an attorney employed by, serving as a board member of, or routinely retained as counsel for an Ohio hospital or health system, or whose law firm represents Ohio hospitals on a regular basis. Membership in SOHA is effective upon formal application and approval of OHA.

BENEFITS OF MEMBERSHIP
* Personal member of OHA
* SOHA member communications on pertinent educational programs and legal issues
* Reduced registration fee to all OHA and SOHA sponsored educational programs
* OHA Annual Meeting information
* Membership meetings and other opportunities to network with other attorneys practicing in the health care field

Ohio Hospital Association
155 E. Broad Street, Floor 15
Columbus, Ohio 43215
(614)221-7614
www.ohiohospitals.org

Find more information on SOHA at:
https://www.ohiohospitals.org/Member-Services/Personal-Membership-Groups/SOHA.aspx.