

REHA Membership Dues and Application

REHA is a non-profit membership organization. In order to fund the basic expenses associated with our coalition initiatives, we require that employers pay modest annual membership dues.

The dues schedule, which has been revised effective January 1, 2007, has been reduced. The new schedule, below, gives members the option of paying on an annual basis or paying a discounted fee for the full three-year program.

Dues Structure

Number of Employees	Membership Dues
2 to 99	\$50 per year or \$100 for three years
100+	\$100 per year or \$250 for three years

Check Appropriate Boxes

- New Member
 Existing Member

Product Purchasing

- HealthAssurance
 Guardian Dental
 Guardian Group Life

Amount Enclosed _____

Check Number _____

Application

Company Name				
Address		City	State	Zip
Contact Person		Title		
Phone	Fax		E-Mail	
Benefits Contact Person		Title		
Phone	Fax		E-Mail	
Broker Name			Phone	
Number of Employees	Annual Dues		Effective Date of Coverage	

Please make check payable to REHA and mail to the following address:

*Regional Employers Health Alliance
c/o Benefits Network, Inc.
115 VIP Drive, Suite 300
Wexford, PA 15090*