





# INTEGRATED HEALTHCARE COUNCIL MEMBERSHIP APPLICATION

Thank you for applying for membership in NJAMHAA. Once your membership is approved, you will be able to share information and network with the agencies that provide mental health care and substance use treatment services in New Jersey.

Please provide a one-page description of your company and products/services along with your completed application.

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## How Did You Learn About NJAMHAA?

**# of Employees:**

**Number of Covered Lives  
(if applicable)**

We can have your application for membership reviewed for approval once we receive your completed application and payment. If you are joining within the first six months of the fiscal year, the dues amount for the full year is \$1,545. If you are joining after the six-month point, your dues will be prorated to cover the remainder of the current fiscal year, and we request that you also pay for the entire following fiscal year to ensure you have sufficient time to realize the maximum benefits of your membership and continue as part of NJAMHAA for many more years. We can send an invoice to you if needed. Please either send a check made out to NJAMHAA or indicate your plans to pay by credit card when you submit the application. For a credit card payment, you will receive through e-mail a link to a secure web page to process the transaction. Please note there will be service charges incurred if you use your credit card.

Please mail these materials to: NJAMHAA, 3635 Quakerbridge Road, Suite 35, Mercerville, NJ 08619.

If you need additional information, please contact Shauna Moses, Vice President, Public Affairs and Member Services, at (609) 838-5488, ext. 204, or e-mail at [smoses@njamhaa.org](mailto:smoses@njamhaa.org).