



FAHU...

Your Voice, Your Organization

At a time when Congress and state legislatures are considering bills that could change, or even eliminate, your livelihood, NAHU is the one unwavering voice representing your interests. We know how important you are to the health and well-being of the people you serve, and we bring that message to your elected officials, clearly and forcefully, every day.

Won't you help us help you? By joining NAHU, you add your voice to those of over 20,000 of your peers and colleagues. You'll also enjoy the following benefits of membership:

1) Information Resource – With our websites (www.fahu.org) and (www.nahu.org), Health Insurance Underwriter (HIU) magazine, and several newsletters and broadcast emails at your fingertips, you'll always have the most current industry information.

2) Legislative Advocacy – FAHU's & NAHU's legislative efforts strive to educate and inform elected leaders at the federal and state level. We've learned that most legislators simply do not understand the health care system and the agent's role in the system. Through our network of Key Contacts, we cultivate relationships that put us in position to clarify issues before bills are written or votes taken. We strengthen these relationships through activity by both Federal and State PACs.

3) Health Insurance Underwriter Magazine – NAHU's monthly magazine will provide you with tips on selling, information on NAHU's activities on the national, regional, and local level, and updates on website content and other services that NAHU provides. Receiving HIU Magazine monthly is another great investment for your business.

4) Education and Networking – NAHU, FAHU and our local chapters provide continuing education opportunities to keep you abreast of the trends, new products and policy changes in the industry. Through FAHU and our local chapters enough credits are offered to fulfill all of the state's CE requirements. These meetings will also give you time to network with your colleagues and make new acquaintances.

5) Member-Only Benefits – From an exclusive agreement with Marsh Affinity Group for Agent Preferred E&O insurance to discounts on shipping, conference calling, and credit cards, NAHU offers you opportunities to save money on the items you need to operate your business.

To protect your livelihood, and to begin enjoying these membership benefits, simply complete the application on the back of this sheet.

For more information about "your organization," visit our websites at www.fahu.org or www.nahu.org
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You Should Join NAHU Because...

1) NAHU will protect your right to serve your clients needs.

2) You will obtain timely, informative news.

3) You can attend continuing education seminars on the hottest insurance topics.

4) You will share information with top producing insurance professionals.

5) You can participate in grassroots efforts that respond to local, state, and federal legislative issues.

6) You will benefit from a variety of member-only discount programs.

7) NAHU's Code of Ethics demonstrates to your clients your commitment to professionalism

8) You will play an active role in the future of the health insurance industry.

9) You will receive a subscription to HIU, the association's monthly magazine.

10) With NAHU following trends in Large and Small Group Managed Care Plans, Individual Health Plans, Long Term Care Insurance, Disability Insurance, and Medicare Supplements, you will benefit from membership no matter your specialty.



FAHU Membership Application

Last Name	First Name	Designation	
Company	Title	Referral/Sponsor	
Mailing Street Address	City	State	Zip
Telephone	Fax	E-Mail Address	
Home Street Address (for legislative purposes)	City	State	Zip
Home Phone Number	Home Email Address		

Local Association

TALEAHASSFF	\$410.00	JACKSONVILLE	\$380.00
ORLANDO	\$435.00	WEST PALM	\$385.00
MIAMI-DADE	\$435.00	LAKE LAND	\$375.00
DAYTONA BEACH	\$380.00	FORT MYERS	\$385.00
BROWARD COUNTY	\$395.00	MELBOURNE	\$380.00
SARASOTA	\$460.00	TAMPA BAY	\$395.00

Form of Payment Enclosed: **Amount:** _____

- Monthly Draft (please select one) Checking Account Credit Card
 Check (payable to NAHU)
 Annual Credit Card (please select one) Visa MasterCard Am Ex Discover

Bankdraft / Credit Card Authorization Form:

I (we) hereby authorize NAHU to initiate debit entries to my (our) account as indicated.

- Monthly debits will equal one-twelfth of any current applicable national, state or local dues.
- (Please include a voided check from the account to be drafted, or write credit card number below)

 Name (as it appears on the check or credit card) Signature

 Account Number Expiration Date

Please Mark the Box or Boxes For The Areas of Your Practice:

<input type="checkbox"/> Long Term Care	<input type="checkbox"/> Disability	<input type="checkbox"/> Managed Care	<input type="checkbox"/> Retirement
<input type="checkbox"/> Individual	<input type="checkbox"/> Large Group	<input type="checkbox"/> Small Group	<input type="checkbox"/> Worksite Mktg.
<input type="checkbox"/> TPA	<input type="checkbox"/> Self Insured	<input type="checkbox"/> Medicare Supplement	<input type="checkbox"/> Dental

Mail To: FAHU, PO Box 150358, Altamonte Springs, FL 32715-0358
Fax to: 407 831-2990 or Email to fahu@fahu.org

**If you have questions, please contact Dave Sherrill,
 FAHU Executive Director, at 321-244-0427**