

# HEROTHINKTANK

The Health Enhancement Research Organization (HERO) is a 501(c)3 Non-Profit Corporation EIN 63-1141480

## Membership Application



<p><b>Membership Information</b></p> <p>Membership in HERO is an organizational level membership.</p> <p>Membership entitles two employees from your organization to represent your company in the HERO Think Tank.</p> <p>Other employees within your organization are eligible to serve on committees.</p> <p>Membership renews on an annual basis. Dues may be paid annually or in two semi annual installments upon request.</p> <p><b>\$7,000 Membership Dues</b></p> <p>Corporation</p> <p>Employee HWB Provider</p> <p>Healthcare Plan/Provider/Insurer</p> <p>Consulting Firm</p> <p><b>\$4,500 Membership Dues</b></p> <p>Association/ Foundation/Non-Profit</p> <p>Government Agency</p> <p>University</p> <p>Volunteer Based Health Organization</p> <p><b>Payment Method:</b></p> <p>Send Invoice</p> <p>Credit Card</p>	Member Organization	Today's Date		
	<b>Primary Think Tank Representative (Required)</b>			
	First Name	Last Name	Credentials	
	Title	Email		
	Business Phone	Cell Phone		
	Address			
	<b>Secondary Think Tank Representative</b>			
	First Name	Last Name	Credentials	
	Title	Email		
	Business Phone	Cell Phone		
<b>Billing Information (Required)</b>				
First Name	Last Name			
Email	Business Phone			
Name on Card:	Card Type			
Card Number	Exp. Date	CVV		
Billing Address	City	State	Zip	

Submit completed **application** and **core principles** to [info@hero-health.org](mailto:info@hero-health.org).  
 Questions about membership? Please contact the HERO Office at 952-835-4257 24 S. Olive St.  
 #301, Waconia, MN 55387  
[www.hero-health.org](http://www.hero-health.org)