BIOETHICS NETWORK OF OHIO

2017 INSTITUTIONAL MEMBERSHIP FORM

NOTE: In order to properly process your membership, it is *absolutely necessary* that YOU set up a BENO account for your Institution at www.BENOethics.org.

☐ Hospital Systems*, \$1500/yr. For health care systems with 2 or more in Members receive 3 complimentary registrations at the Annual Conference plus all other registrations, 25 copies of the Bio-Quarterly and a certificate of members this amount and you receive 6 complimentary registrations at the Annual Conference	a discount on rship. Double
☐ Institutions, \$350/yr. For clinical, non-clinical, health care or academic Members receive a discount for the Annual Conference, 15 copies of the Bio-Qu certificate of membership.	
(Please print all information) CONTACT PERSON Degree (s)	
TITLE	
*INSTITUTION	
ADDRESS	
CITYSTATEZIP	
PHONE FAX	
EMAIL	
*List all hospitals in your system:	
□ Please sent me a certificate of membership & list the name as	
☐ Check: Visit our website, www.BENOethics.org to set up your institution account. Make your check payable to BENO and mail to MA Marketing Communication, 2653 Ramsay Rd., Beachwood, OH 44122.	
☐ Credit Card: Visit www.BENOethics.org to set up your institution account & pay.	
Contact us at Ijmarket@ma-marketing.net if you have any questions or need to check your membership status.	