

Ohio Pain Initiative Membership Form

555 Metro Place North, Suite 650

Dublin, OH 43017

614-763-0036

www.ohiopaininitiative.org

Type of Membership: Friend (\$20) Individual (\$50) Organization (\$200)
(please circle one) Industry (Silver \$1000, Gold \$2500, Platinum \$5000, Diamond \$10,000)

Name: _____ Title/Degrees: _____

Organization: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Subcommittee you be willing to sit on? (Please choose at least one)

Standards/Professional Educ. Fundraising/Marketing Membership/Newsletter Public Education

Friend \$20

Subscription to *The Resource*
(OPI's official newsletter)

Individual \$50

Subscription to the
expanded version of
The Resource
(OPI's official newsletter)
which now includes clinical
articles!

Discounted conference admission.

Organization (\$200)

Subscription to the
expanded version of
The Resource
(OPI's official newsletter)
which now includes clinical
articles!
5 copies

Recognition in OPI publications

Industry

Silver \$1,000
Gold \$2,500
Platinum \$5,000
Diamond \$10,000

Subscription to the
expanded version of
The Resource
(OPI's official newsletter)
which now includes clinical
articles!
5 copies

Recognition in OPI publications

**Memberships active
January 1 through
December 31**

*You must be a paid member
to receive ballot information
in April and to receive the
discounted conference rate in
May.*

Membership fee: \$ _____

Donation: \$ _____

Total enclosed: \$ _____

Please mail membership form along with your payment/donation (payable to OPI) to:
OPI, 555 Metro Place North, Dublin, Ohio 43017