

Membership Form

GLMA's mission is to ensure equality in healthcare for lesbian, gay, bisexual and transgender (LGBT) individuals and healthcare providers.



GLMA is a 501(c)(3). All contributions, including membership, are tax-deductible, less the value of benefits received.

Contact Information

First Name* MI Last Name* Degree(s)*

Email Address* Profession*

Home Phone Work Phone Cell Phone

Mailing Address

City* State* Zip* Province/Country

☐ Please send me information about creating a listing on GLMA's online Provider Directory.

*required field

I am a: (Please select one.)

☐ Health Professional ☐ Student Anticipated graduation date (mm/yy) ____ / ____ ☐ Friend of GLMA

I am preparing for a career as a: _____.

Contribution Plans (Please select one.)

A. ☐ I want to be a **Sustaining Member**.* B. ☐ I prefer to make **One Annual Contribution**.

Charge my credit card: ☐ Monthly ☐ Quarterly. Sign me up for ☐ Automatic Renewal.*

* Contact info@glma.org to change or to discontinue your ongoing support.

Membership Levels	Sustaining Contribution (Monthly)	Annual Contribution
<input type="checkbox"/> Advocate for LGBT Health	\$ 25.00	\$ 300
<input type="checkbox"/> Partner for LGBT Health	\$ 50.00	\$ 600
<input type="checkbox"/> Leader for LGBT Health – Major Donor Level	\$ 83.33	\$ 1,000
<input type="checkbox"/> Champion for LGBT Health – Major Donor Level	\$ 208.33	\$ 2,500
<input type="checkbox"/> Visionary for LGBT Health – Major Donor Level	\$ 416.67	\$ 5,000
<input type="checkbox"/> Health Professional Member (Basic Membership Level)	\$ 10.41	\$ 125
<input type="checkbox"/> Student Member - 1 year	\$ 2.08	\$ 25
<input type="checkbox"/> Student Member – Multiple years (\$20 per year)	(\$20 x no. years for one time charge)	\$ _____
<input type="checkbox"/> Friend of GLMA (<i>primarily non-health professionals</i>)	\$ 4.17	\$ 50
<input type="checkbox"/> Other Amount – Please Specify	\$ _____	\$ _____

Visit www.glma.org/membership for a more detailed list of member benefits.

☐ Please designate _____ % of my tax-deductible membership contribution to the Lesbian Health Fund.

Add a Section to your Membership

☐ Nursing Section – One-time annual contribution of \$25

Please consider an additional one time donation.

For more information about our programs and recent accomplishments, visit our website at www.glma.org.

Lesbian Health Fund \$ _____
GLMA \$ _____

Payment Information

☐ Check (Payable to GLMA)

☐ Credit Card ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Name on Card Card Number Expiration Date

Signature

Return to:

1326 18th Street NW, Suite 22, Washington DC 20036 or fax (202) 478-1500
You will be contacted with a username and password to update your online profile.
For questions, please email membership@glma.org or call (202) 600-8037.

Office Use Only

Received on: _____ Processed on: _____

Processed by: _____ Method: _____

Become a Sustaining Member!

A **Sustaining Membership** allows you to make a small membership contribution each month or quarter while making a big impact for LGBT health equality. Choose an amount from \$8.33 to \$83.33, or any amount that fits your budget. We will process your contribution once a month, so your membership will never lapse and you will never have to renew. Monthly contributions from our Sustaining Members provide the reliable support that we need to continue our important programs and advocacy work to advance LGBT health.

GLMA Membership Levels & Benefits

Annual Payment

Advocate for LGBT Health

\$300 (\$25/mo)

- Weekly LGBT Health Digest
- Regular GLMA Membership Updates & Action Alerts
- Quarterly GLMA Report delivered to your electronic inbox
- Professional Networking at the Annual Conference, local events and other opportunities
- Enhanced Provider Directory Listing (*for practicing healthcare professionals only*)
- Discounted Conference Registration
- Complimentary ticket to the Annual Membership Lunch for conference registrants.

Partner for LGBT Health

\$600 (\$50/mo)

- Confidence in knowing that you are making a positive difference for LGBT health equality
- All Advocate for LGBT Health Member benefits
- Free registration for CME credits

Leader for LGBT Health

\$1,000 (\$83.33/mo)

- Confidence in knowing that you are making a significant impact for LGBT health equality
- All Advocate for LGBT Health Member benefits
- Free registration for CME credits
- Website recognition as a **Major Donor**
- Quarterly Teleconference: GLMA update with the Executive Director or Board President
- "GLMA Leader" Major Donor Pin
- Invitation to the Major Donor Reception at the Annual Conference

Champion for LGBT Health

\$2,500 (\$208.33/mo)

- Confidence in knowing that you are making a significant impact for LGBT health equality
- All Leader for LGBT Health benefits
- "GLMA Champion" Major Donor Pin
- Invitation to the Major Donor Reception at the Annual Conference
- One complimentary ticket to the Annual Gala

Visionary for LGBT Health

\$5,000 (\$416.67/mo)

- Confidence in knowing that you are making a significant impact for LGBT health equality
- All Leader and Champion for LGBT Health benefits
- "GLMA Visionary" Major Donor Pin
- Invitation to the Major Donor Reception at the Annual Conference
- Two complimentary tickets to the Annual Gala

Health Professional Member

- Weekly LGBT Health Digest
- Regular GLMA Membership Updates & Action Alerts
- Professional Networking at the Annual Conference, local events and other opportunities
- Enhanced Provider Directory Listing (*for practicing healthcare professionals only*)
- Discounted Conference Registration
- Complimentary ticket to the Annual Membership Lunch for conference registrants.

Student Member

\$25 for one year, \$20 each year for multiple years

- All Health Professional Member benefits

Friend of GLMA: *for non-health professionals*

\$50

- All Health Professional Member benefits