

Mended Hearts, Inc. – Chapter #38 – Houston, TX

Membership Application



It's great to be alive,
and to help others.

Contact Information

Name (Mr./Mrs./Ms.)	
Street Address	
City ST ZIP Code	
Home Phone	
Email Address	
Birthdate	

Confidential Medical Information for the Mended Hearts National Database

Check all procedures or treatments that are applicable.

<input type="checkbox"/> Pacemaker	<input type="checkbox"/> Aneurysm	<input type="checkbox"/> MI	<input type="checkbox"/> Congestive Heart Failure
<input type="checkbox"/> Defibrillator	<input type="checkbox"/> Bypass	<input type="checkbox"/> PTCA	<input type="checkbox"/> Transplant
<input type="checkbox"/> Artrial Septal Defect	<input type="checkbox"/> Valve	<input type="checkbox"/> Stent	<input type="checkbox"/> Other _____

Date(s) of Procedures(s): _____ Surgeon: _____ Hospital: _____

Do you agree to allow Mended Hearts to publish your name and procedure anniversary in the Chapter Newsletter? Yes ___ No ___

Signature _____ Are you retired? Yes ___ No ___

Name of Spouse (if family membership) _____ Spouse Birthdate: _____

Are you interested in: Committee work ___; Hospital Visiting ___; Other (specify): _____

Membership Dues (National and Chapter)

Term:	Individual:	Family:
First year only	___ \$25 (\$20 National + \$5 Chapter)	___ \$38 (\$30 National + \$8 Chapter)
Renewal (billed by National)	___ \$25 (\$20 National + \$5 Chapter)	___ \$38 (\$30 National + \$8 Chapter)
Lifetime Membership	___ \$200 (\$150 National + \$50 Chapter)	___ \$285 (\$210 National + \$75 Chapter)

Please make checks payable to: Mended Hearts, Inc. and mail to:

Membership Chair
Mended Hearts, Inc., Chapter #38
6720 Bertner Ave., 1-132
Houston, TX 77030