



WVSHP Institutional Membership

Institutional Membership is an affordable and effective way to purchase WVSHP membership for your entire staff and keep them: informed on statewide issues affecting the industry; engaged in continuing education; and active in peer-to-peer networking opportunities!

Institutional Members may register all departmental employees based on the number of pharmacists in employment. (Please note, the fees below are based on number of pharmacists in employment, not all full-time employees.) WVSHP Institutional Members also receive a 25% discount on exhibitor fees for WVSHP events.

Membership Tier

Membership Tier Levels	Member Numbers	Fee Per Tier
Tier Level 1	3-5 staff members	\$225
Tier Level 2	6-10 staff members	\$450
Tier Level 3	11-15 staff members	\$825
Tier Level 4	16-20 staff members	\$1,200
Tier Level 5	21-25 staff members	\$1,500
Tier Level 6	26+ staff members	\$1,800

Membership benefits and opportunities

- Quality CE and other programming are available to you at reduced registration fees (i.e., Annual Meeting and District programming).
- E-Newsletters and a user-friendly website to keep you current on topics facing health-system pharmacy.
- The Legislative Committee, which represents WVSHP members and health-system pharmacy on Board of Pharmacy and legislative issues.
- Improved networking with your colleagues
- Get involved and let your voice be heard on important issues facing the profession. There are many opportunities for professional involvement and leadership development through WVSHP by serving on one of our committees.
- Complementary use of Career Center for open positions in your pharmacy

Becoming an Institutional Member

To become an institutional member of WVSH, please complete the brief form below and return it to WVSH Headquarters with appropriate payment and a list of all pharmacists and technicians at your hospital including:

- First & Last Name
- Identify membership category: pharmacist, resident, or technician
- Mailing Address
- Daytime phone number
- Evening or cell phone (if available)
- **E-mail address**

INSTITUTIONAL MEMBERSHIP APPLICATION

Institution: _____

Director of Pharmacy: _____

Director's E-mail Address: _____

Hospital Pharmacy Mailing Address: _____

City, State & Zip: _____

Main Pharmacy Dept. Phone: _____

Membership Tier Selection

- Tier Level 1 (3-5 staff) \$225.00
- Tier Level 2 (6-10 staff) \$450.00
- Tier Level 3 (11-15 staff) \$825.00
- Tier Level 4 (16-20 staff) \$1,200.00
- Tier Level 5 (21-25 staff) \$1,500.00
- Tier Level 6 (26+ staff) \$1,800.00

A participant information form is attached to share with your staff to compile the needed information. A list (preferably as an excel file) of participants detailing this information must be submitted to WVSH to sara@centrichq.com.

Please remit payment to:

West Virginia Society of Health -System Pharmacists (WVSH)
PO BOX 590
Culloden, WV 25510

Phone: **707-55-WVSH**
E-mail: **wvshp1@gmail.com**



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PARTICIPANT INFORMATION FORM

Please submit this information to the hospital representative overseeing this WVSHP membership, to be submitted to WVSHP Headquarters.

WVSHP helps you stay in touch with the changing environments of hospital and health-system pharmacy, learn new skills, identify opportunities, make new contacts, and advance your career. Additional opportunities are available through participation on one of WVSHP's committees.

Please check appropriate membership category:

- Pharmacist
- Pharmacy Technician
- Resident

Name: _____

Address: _____

City, State, Zip: _____

E-mail: _____

Telephone: _____

I'm interested in learning more about the following WVSHP Committee(s):

- Awards
- Education
- Legislative
- Membership
- New Practitioners
- Scholarship