

DIRECTTRUST.ORG, INC.

MEMBERSHIP APPLICATION

DIRECTTRUST.ORG, INC. MEMBERSHIP APPLICATION

Thank you for your interest in DirectTrust.org, Inc. (“DirectTrust.org”). This is an application to join DirectTrust.org. We welcome new members from all of the eligible categories described below, including those who are converting their membership in the wiki site provided by DirectTrust.org to full membership in DirectTrust.org. To keep the administrative process for membership simple, this application form has several Parts.

Part 1: DirectTrust.org Membership Process Information

Part 2: Specifies basic demographic and contact information Part

3: DirectTrust.org Membership Eligibility

Part 1: DirectTrust.org Membership Process Information

If you have any questions, please direct them to admin@directtrust.org.

Please send the completed Membership Application [with your Dues Payment] to us by mail to the address listed at the end of this document. Once we have confirmed your eligibility for membership, we will send you a new member welcome letter to the address you have provided.

Part 2 : Demographic and Contact Information

Organization Information

Legal Name:

Mail address:

Legal or Tax

Classification

(i.e., Corporation, Non-

Profit, Public Agency,

Student, Individual,

Medical or Dental

Partnership)

Contact Person (*Your organization’s delegate to represent them within DirectTrust.org*)

DIRECTTRUST.ORG, INC.

MEMBERSHIP APPLICATION

Name: _____

Title _____

Email address: _____

Mail address: _____

Telephone: _____

Fax: _____

Mobile: _____

Check if this is a change in information _____

Organizational Description *(Please provide a brief overview of your organization's mission, products, and/or customers. If you are a professional applying as an individual, please briefly describe the work you do.)*

Membership Dues *(Please see the accompanying Membership Categories and Dues document, and indicate for which category your organization is paying dues)*

Category: _____

Dues Payment Amount: _____

Part 3: DirectTrust.org Membership Eligibility

Key Provisions of DirectTrust.org Bylaws *Members must be committed to, and understand, the nature and purposes of DirectTrust.org. Following are key provisions from the Bylaws of DirectTrust.org, Inc.*

DIRECTTRUST.ORG, INC.

MEMBERSHIP APPLICATION

DirectTrust.org, Inc. ("DirectTrust.org"), is a non-stock, not-for-profit corporation. To qualify for membership, a member must attest that the member is committed to the purposes of DirectTrust.org, and must be in good standing in the payment of dues. Each organization that is a member must be represented within DirectTrust.org by a duly-authorized individual. The Board of Directors of DirectTrust.org has the right to deny or rescind membership if it is determined, in the Board's sole discretion, that due to legal actions, complaints, industry reputation, business, marketing, advertising or other practices, or noncompliance with any Directed exchange business practices required for good standing with DirectTrust.org, a member or prospective member is incompatible with the purpose of DirectTrust.org as set forth in the Certificate of Incorporation or DirectTrust.org's tax exempt status. A member whose membership is rescinded by the Board shall have a *pro rata* portion of the member's dues refunded, based on the number of months in the current membership year that follow the rescission.

Membership in DirectTrust.org is open to all those with a business interest in the adoption and success of Directed exchange over the Internet of electronic health information as part of the Nationwide Health Information Network, including: any Directed exchange participant who is a provider or user of Directed exchange services; any healthcare provider organization, any person providing services to healthcare providers, any governmental entity, any educational or scientific research organization and any other nongovernmental entity serving the healthcare industry, with an interest in Directed exchange. To ensure diversity of viewpoints, it is intended that the membership of DirectTrust.org be drawn from all of the following categories:

- Corporations, partnerships, and other for-profit entities;
- Individuals with an interest in the Nationwide Health Information Network not otherwise eligible for membership in a group or institutional category;
- Medical and dental practices, including enterprises with physicians, dentists or other medically trained personnel that provide direct medical services and/or managed care services to patients;
- Nonprofit professional, charitable, scientific or educational organizations that qualify under section 501(c) of the Internal Revenue Code, including patient and consumer advocacy organizations;
- Hospitals and healthcare systems, including enterprises with medically trained personnel that provide direct medical services and/or managed care services to patients;
- Academic medical centers and related teaching hospital(s) and clinic(s);

DIRECTTRUST.ORG, INC.

MEMBERSHIP APPLICATION

- Public agencies, including federal, state, city, and county agencies and special governmental districts or entities; and
- Full-time students at accredited institutions of higher learning.

Commitment to the Purpose of DirectTrust.org Pursuant to the Bylaws, members of DirectTrust.org must attest as follow:

"I understand that, by applying to become a member of DirectTrust.org, Inc. ("DirectTrust.org"), I am committing to support the purposes of the organization, which are to serve as a forum, for persons and entities involved with or interested in Directed exchange over the Internet of electronic health information as part of the Nationwide Health Information Network to: share information; engage in education; identify best practices; develop standards; facilitate security, interoperability and trust among Directed exchange participants; foster public confidence; and otherwise promote the adoption and success of Directed exchange, consistent with state and federal law. I understand, further, that if I am applying on behalf of my organization or employer, I am committing to represent my organization or employer within DirectTrust.org, as my organization's or employer's duly-authorized delegee."

On behalf of [name of organization:] _____

I attest to the foregoing commitment to the purposes of DirectTrust.org, and have read and understand the key provisions of the Bylaws.

Signature:

Name: *(please print)*

Title:

Date:

DIRECTTRUST.ORG, INC.

MEMBERSHIP APPLICATION

Please send this application with your dues payment to:

Mail address:

DirectTrust.org Member Services

PO Box 2885

Blairsville, GA 30514

United States

Make checks payable to:

DirectTrust.org