

Auxiliary Membership Benefits

	Volunteering Member	Associate Member
DMH Cafeteria Discount	X	X
Health Screenings	X	X
Special Events	X	X
Educational Seminars	X	X
Flu Shots	X	X
Travel Opportunities	X	X
Lifeline - Installation Discount	X	X
Hospital Staff Special Events	X	X
Fundraisers	X	X
Annual Service Awards	X	
Free meals for every 4 hours worked	X	
Gift Shop Discount	X	
Exercise at DMH Wellness Center	X	
Quarterly Hospital Education	X	
Free Parking in Parking Deck	X	

The **Decatur Morgan Hospital Auxiliary** is made up of friends of the hospital, both **Active Volunteers** and **Associate Members** who support and help Decatur Morgan Hospital.

There are many ways to participate in the Auxiliary:

- volunteering
- fundraising
- helping others
- taking an active role in your health
- staying physically active
- participating in health screenings and educational seminars
- being social
- choosing Decatur Morgan Hospital as your healthcare provider

Auxiliary Membership is open to all adults in our service area who wish to join. Your Community Relations team works very hard to offer fun and exciting opportunities for Auxilians so that you can reap all of the rewards and benefits of membership!

Thanks for being a part of it!



DMH Auxiliary Membership Application and Benefit Information

DMH Auxiliary is a Decatur Morgan Hospital program designed with you in mind — to help you maintain a healthy, active way of living while supporting your community hospital.



deaturmorganhospital.net

AUXILIARY MEMBERSHIP APPLICATION

Mr./Mrs./Ms. _____

First Name Middle Name Last Name

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____

Date of Birth ____/____/____ Sex ____ Married Widowed Single

Spouse _____ Date of Birth ____/____/____
 First Name Middle Initial Last Name

How did you hear about the DMH Auxiliary?

Please pay by Cash or Check - payable to DMH /Auxiliary
P.O. Box 2239
Decatur, Alabama 35609-2239

- One person - One Year Membership \$15.00
- One Person - Two Year Membership \$27.00
- Two People - One Year Membership \$27.00
- Two People - Two Year Membership \$51.00

(Community Relations Department only)

Received _____

Expiration Date: _____

Receipt _____

Recruiter Name: _____

ID # _____

Department: _____

Return your completed application to the **Community Relations Department** at Decatur Morgan Hospital.

Mailing Address:

Decatur Morgan Hospital
 Attn: DMH Auxiliary
 P.O. Box 2239
 Decatur, AL 35609-2239

For more information, contact the Community Relations Department at 256.973.2184, drop by and visit or send an email with your questions community.relations@dmhnet.org.

Call the reservation line at 256.973.3222 to RSVP for Auxiliary events!

