h2u health happiness you — become a member today!

The h2u program is dedicated to understanding the unique health needs of adults and providing them valuable health information, resources and experiences.

new member *(new members are eligible for $100 VISA gift card drawing!)*

FIRST NAME | MIDDLE INITIAL | LAST NAME

ADDRESS | CITY | STATE | ZIP CODE

PHONE | E-MAIL ADDRESS

DATE OF BIRTH | LAST 4 DIGITS OF S.S.#

please check one

GENDER
- ❍ Male ❍ Female

MARITAL STATUS
- ❍ Single ❍ Married ❍ Widowed

CHILDREN
- ❍ At home ❍ Grown ❍ N/A

CAREGIVER FOR
- ❍ Grandchild ❍ Parent ❍ Other

WORK STATUS
- ❍ Full-time ❍ Part-time ❍ Retired

How often do you use the Internet?
- ❍ Daily ❍ Weekly ❍ Monthly

How did you hear about h2u?
- ❍ Friends/current member
- ❍ www.h2u.com
- ❍ Sponsoring hospital
- ❍ Physician's office
- ❍ Seminar/speaker/event
- ❍ Health fair
- ❍ Newspaper
- ❍ Mail

I am joining h2u for:
- ❍ Discounts
- ❍ Health information
- ❍ Online health tools
- ❍ Social activities
- ❍ Member hospital privileges
- ❍ Health screenings

health interests

Have you ever been a patient in the hospital that sponsors this h2u program?
❍ Yes ❍ No

Have you ever received outpatient services at the hospital that sponsors this h2u program?
❍ Yes ❍ No

Do you have a physician to care for your routine healthcare needs?
❍ Yes ❍ No

The following health topics would interest me:

Please check all that apply

- ❍ Heart & vascular health
- ❍ Neurology
- ❍ Women's health
- ❍ Sleep disorders
- ❍ Caregiving
- ❍ Pulmonary rehab
- ❍ Health screenings
- ❍ Diabetes
- ❍ Cancer prevention
- ❍ Rehabilitation
- ❍ Cancer detection & treatment
- ❍ Heartburn-reflux
- ❍ Bone & joint care
- ❍ Pediatric services
- ❍ Men's health
- ❍ Wound care
- ❍ Health seminars
- ❍ Pain management
- ❍ Immunizations
- ❍ Open heart surg
- ❍ Healthy lifestyles
- ❍ Nutrition
- ❍ Family health
- ❍ Breast disease
- ❍ Obesity
- ❍ Menopause
- ❍ Orthopedics
- ❍ Obstetrics
- ❍ Cardiac services
- ❍ Osteoporosis

referring member

Current h2u members who refer a new member will be entered in the monthly and grand prize drawings!

NAME OF REFERRING MEMBER

MEMBERSHIP ID # *(from h2u card)*

MEMBER ADDRESS *(If no member ID# available)*

enrollment options

- ❍ New member ❍ Renewal
- ❍ One-year membership $15 (H1)
- ❍ Two-year membership $30 (H2)

Assign my membership to:

HOSPITAL NAME

payment

- ❍ Check or money order (payable to *h2u*)
- ❍ Master Card ❍ Visa

ACCOUNT NUMBER

EXPIRATION DATE

PRINT CARDHOLDER NAME

SIGNATURE

DATE

four easy ways to enroll

1. **Mail to h2u** P.O. Box 1300, Nashville, TN 37202.
2. **Call 800-771-0428** to charge by phone.
3. **Forward to your** local h2u affiliate.
4. **Join online at** www.h2u.com.

MEMBERSHIPS ARE NON-REFUNDABLE, NON-TRANSFERABLE AND PRIVILEGES ARE SUBJECT TO CHANGE WITHOUT NOTICE.