



# ALHO Renewal Form

*Year: 2012*

Name: \_\_\_\_\_ Cell # \_\_\_\_\_

Facility or Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

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SURVEY:

1. How long have you been an ALHO member? \_\_\_\_\_
2. How did you hear about ALHO? \_\_\_\_\_
3. Are you an active member of ALHO?  Yes  No, if your answer is no, why?  
\_\_\_\_\_
4. Being an ALHO member benefits you professionally?  Yes  No
5. What are your experiences being an ALHO member?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In order for us to serve you and the community better, your honest opinion is appreciated and will be handled in strict confidence. Please email your response to [alhoofarizona@gmail.com](mailto:alhoofarizona@gmail.com)

Thank you  
ALHO Team