

NEW YORK STATE HOSA MEMBERSHIP APPLICATION

Due to some changes in Federal and New York Education laws you will need to provide your advisor with the information below as they are not allowed to get the information from school files. If you complete the application form we will be using this information only for HOSA membership registration, Fall Leadership Conference registration, Spring Leadership Conference registration, International Conference Registration, and use for newsletters and website (script, videos and pictures).

Welcome to HOSA! In order to complete your membership application, you need to complete this form:

First Name		Last Name				
Home Street Address			-			
City		State	NY	Zip Code		
Phone Number		Email Address				
Grade	Gender (Male, Female, Other)		Race (Asian, Black, Native Americ Other)			
School Name			•			
School Address Street		City			Zip Code	
Advisor's Name						
Advisor's email			Chapter i	# (if known)		
Student Signature				Date		
Parent Signature				Date		

For legal reasons we need the actual signatures do not select a signature style font to sign.

Dues for 2022 -2023 are **\$22.00**[‡] \$10 for HOSA national level membership, \$12 for HOSA state level membership. *Your chapter may add an additional fee to support your school chapter.