

2024 Dues Invoice - Organizational Membership

Organizational Membership Definition: a MSU group or hospital who is involved or plans to be involved in pre-hospital stroke management may join. The organization will pay dues on behalf of its members. The individual members of the organization may attend meetings but will not pay dues or vote (unless they are also Individual Members)

| Name of institution: | | |
|--------------------------------|------------------------|--------------------------------|
| Primary contact name | (include credentials): | |
| Email address: | | |
| Phone number: | | |
| Street address: | | |
| City: | State/Province: | Zip code: Country: |
| Number OF MSUs: | | MSU Funding Source |
| Individuals under this | organizational membe | ership: |
| 1. Name (include crede | entials): | 4. Name (include credentials): |
| Email: | | Email: |
| 2. Name (include credentials): | | 5. Name (include credentials): |
| Email: | | Email: |
| 3. Name (include credentials): | | 6. Name (include credentials): |
| Email: | | Email: |
| | | |

| 7. Name (include credentials): | | 9. Name (include credentials): | |
|--|----------------------------------|--|--|
| Email: | | Email: | |
| 8. Name (include credentia | als): | 10. Name (include credentials): | |
| Email: | | Email: | |
| | | | |
| • • | | check or ACH (details below). If you prefer to pay by credit card* processing fee. | |
| Option 1. Mail checks to: PRESTO 1935 County Road B-2 W, S Roseville, MN 55113 USA | Suite 165 | | |
| Option 2. Complete the at with voided check. | ttached <u>direct deposit fo</u> | orm and return via mail (see Option 1 for address) | |
| Option 3. Credit card payr Must be FAXED ONLY to (8 | | and American Express): | |
| Name on Card: | | | |
| Billing Address: | | | |
| Card number: | | | |
| Expiration Date: | CVV code: | | |
| | | | |

*Credit card payments will be processed for a total amount of \$2,060.00.

The PRESTO membership year runs January 1 – December 31.

PRESTO is in the process of applying for 501(c)3 non-profit status, which will enable your dues to be tax deductible. All paid members will be notified of the status of the 501(c)3 application in the next few months.

Phone: (952) 646-2032 ● Fax: (888) 381-0170 ● Email: connect@prestomsu.org