Membership Application: Please complete and mail with payment to the Coalition
(Online Membership Application and Payment Available at www.oralhealthmissouri.org)

**Annual Membership – January through December**

**The Missouri and Vision of the Coalition for Oral Health**
*The Mission of the Missouri Coalition for Oral Health is to improve oral health with all Missourians by advocating for sound public policy. The Vision of the Missouri Coalition for Oral Health is Oral Health for all Missourians.*

Join the diverse membership of the Coalition to make a positive difference for the future of Missouri!
The Missouri Coalition for Oral Health is a private non-profit corporation funded by donations, health care foundations, and memberships of advocates and organizations throughout Missouri, including the Missouri Dental Association, the Missouri Dental Hygienists’ Association, the Missouri Primary Care Association, UMKC School of Dentistry, HealthWorks! Kids Museum St. Louis, AT Still University MO School of Dentistry and Oral Health, Missouri Area Health Education Centers, Cass County Dental Clinic, Jordan Valley Community Health Center, the St. Louis Regional Health Commission, the Health Care Collaborative of Rural Missouri, Ozarks Technical Community College, Central MO Community Action Head Start, Community Health Center of Central Missouri, State Fair Community College, Greater St. Louis Dental Hygienists’ Association, Delta Dental of Missouri, DentaQuest, MO Highlands Health Care, SEMO Health Network, Comprehensive Health Center, Heartland Outreach Providers, Liberty Dental Plan, Children’s Smile Center, Missouri Department of Mental Health, Missouri Department of Health and Senior Services.

**Membership Benefits**
- Join your voice with others to have a positive impact on oral health policy
- Connect to a statewide network of Coalition members and advocates concerned about the oral health of Missourians
- Receive notifications on important issues, media coverage and legislation impacting the oral health of Missourians
- Participate in opportunities to serve on issue committees
- Receive invitations to meetings and events
- Participate in opportunities to impact legislation and policy

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<tr>
<th>Membership Type</th>
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<td>__ Organization (other than State Agency/Institution)</td>
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<tr>
<td>__ State Agency/Institution (MO State Department or state-operated college/university)</td>
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<tr>
<td>__ Individual</td>
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<tr>
<td>__ Student/Limited Income</td>
<td>$10</td>
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*By seeking membership in the Missouri Coalition for Oral Health
I am pledging to support and help to accomplish the Mission of the Coalition.

**Membership Information**

Name/Organization Contact Name: ____________________________________________________________

Organization: __________________________________________________________________________

Address: ______________________________________________________________________________

City: ________________________________ County: __________________ State: _______ Zip: _________

Occupation/Title: _________________________________ Professional Credentials: _________________

E-Mail:    _______________________________________________________________________________

Phone: _________________________ 2nd Phone: _______________________ FAX: ___________________

___ My name/organization name may be shared on the Coalition website and in Coalition material as a member
___ My contact information may be shared with other Coalition members for local oral health networking

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