



CIMS
 COALITION FOR IMPROVING
 MATERNITY SERVICES

2010 ORGANIZATION MEMBERSHIP FORM

Be a part of our collective effort to realize Mother-Friendly Care by adding the voice of your organization to the Coalition for Improving Maternity Services (CIMS) as an Annual Organization Member.

Organizational Member Benefits:

- Raise awareness and demand for evidence-based care by adding the voice of your organization to the nation's only coalition of maternity care providers, childbirth organizations, birth advocates and consumers.
- Be visibly recognized on the new www.MotherFriendly.org web site.
- Be part of CIMS service projects, such as a coordinated calendar of all Organizational Member events on the CIMS website.
- Be highlighted in and receive the e-CIMS newsletter.
- Receive product discounts (including bulk orders).

Membership* Levels:	2010^ Membership Fee:	Recognition:
Grassroots Member	\$100 - \$499	Recognition on the CIMS website with link placement to your organization's home page.
Advocate Member	\$500 - \$999	Recognition on the CIMS website with link placement to your organization's home page plus one graphic placement in <i>e-CIMS News</i> in 2010.
Leader Member	\$1,000 - \$5,000+	Recognition on the CIMS website with link placement to your organization's home page, one graphic placement in <i>e-CIMS News</i> in 2010, plus one graphic placement on the CIMS home page for up to 30 consecutive days in 2010.

*CIMS has a non-voting membership according to our bylaws.
 ^The 2010 Organizational membership year runs from Sept. 1, 2009-Dec. 31, 2010.

Organization Name: _____

Contact Person: _____ Title: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____ Web site: _____

Join the CIMS Membership online at www.motherfriendly.org/organizational_member.php or enter payment information below.

A check for \$ _____ is enclosed.

Credit Card Payment: (please circle) **VISA** | **MASTERCARD** Amount: \$ _____

Card #: _____ Exp. Date: _____

Billing Address (street, city, state, zip): _____

Name on Card: _____ Signature: _____

Please mail or fax this form to: Coalition for Improving Maternity Services (CIMS)
 1500 Sunday Drive | Suite 102 | Raleigh, NC 27607 USA
www.motherfriendly.org | (p) 888.282.CIMS (2467) | (f) 919.787.4916

CIMS is a not-for-profit organization recognized as tax-exempt under Internal Revenue Code section 501(c)(3). Our mission is to promote a wellness model of maternity care that will improve birth outcomes and substantially reduce costs.