



Central Florida Case Management Society of America (CF-CMSA) has a new website (with advanced features offering your company the opportunity to provide expanded information about your business! Reach the audience that means something to your company – be sure you are included on the new CMSA website.

- Premium Listing** for only \$200 annually.
- Enhanced Listing** for \$100 annually
- Basic Listing** for \$50 annually

Each level offers unique benefits to feature your company!

Please mail form with check to CMSA Treasurer

Brenda Randall
1551 Hobson St.
Longwood, Florida 32750

Remember to **PRINT** carefully to reduce errors:

BASIC LISTING:

Company Name: _____

Business Phone: _____

Check the ONE category that best describes your business, service or organization

- | | |
|--|---|
| <input type="checkbox"/> Adult Day Care | <input type="checkbox"/> Home Health |
| <input type="checkbox"/> Assisted Living Facility | <input type="checkbox"/> Medicare |
| <input type="checkbox"/> Care Management | <input type="checkbox"/> Private Duty |
| <input type="checkbox"/> Durable Medical Equipment | <input type="checkbox"/> Independent Living |
| <input type="checkbox"/> Education | <input type="checkbox"/> Insurance Company |
| <input type="checkbox"/> Financial Services | <input type="checkbox"/> Legal Services |
| <input type="checkbox"/> Guardianship | <input type="checkbox"/> Medical Staffing |
| <input type="checkbox"/> Community Based Non-Profit Organization | <input type="checkbox"/> Physician |
| <input type="checkbox"/> Diagnostic | <input type="checkbox"/> Skilled Nursing Facility |
| <input type="checkbox"/> Holistic | |
| <input type="checkbox"/> Hospice | <input type="checkbox"/> Therapy Services |
| <input type="checkbox"/> Hospital | <input type="checkbox"/> Transportation |

Other: describe: _____

ENHANCED LISITNG includes above information and –

Address: _____

Contact Name: _____ Title: _____ Fax: _____
(With Enhanced Listing you may select two categories listed above for your company if applicable)

PREMIUM LISTING includes above information and -

Other Phone: _____ Email: _____

Website address: _____ (this will provide a link to your website)

You will be contacted to provide your logo in jpeg format for inclusion on the Premium Listing.

Write a description of your business as you wish it to appear on the website:

(CMSA will make every effort to include your full description, but reserves the right to edit as needed – continue on the back of this page if necessary)