



**NATIONAL ASSOCIATION OF
RURAL HEALTH CLINICS**
2026 Q1 NEW MEMBERSHIP APPLICATION
Effective: January 1 - March 31, 2026



Click this QR code for the online membership form.

New Provider Based (PB) RHC:

- \$300.00 New PB RHC
- \$180.00 Each Additional Clinic
- _____ Number of Additional Clinics = \$ _____

New Independent RHC:

- \$300.00 New Independent RHC
- \$180.00 Each Additional Clinic
- _____ Number of Additional Clinics = \$ _____

** New refers to an RHC who has never been a member of NARHCs in the past. Clinics pending certification will fall under this membership type unless being added to a current membership. Unsure if your clinic has previously been a member? Please call 866-306-1961 to verify. **A Government membership is meant for federal and state agencies only.*

NARHC Member Benefits:

- NARHC Advocates for RHCs in Washington D.C. Your support helps make this possible!
- Free Benchmarking for Member RHCs.
- Free NARHC Academy courses: *Introduction to RHCs & Becoming an RHC - All Things Considered*
- Save \$100 per person on NARHC conference registrations*
- Take advantage of our discounts on Certified RHC Professional (CRHCP) course registrations* and our individual modules.
- Exclusive discounts with our vendor and consultant partners!
- Sample Files (forms, checklists, and surveys)
- Access to members-only webinars.
- The Bill Finerfrock Health Policy Fellowship! As a member you may apply for this exciting opportunity to make a real impact on rural health policies.
- Policy development opportunities: Be at the forefront by serving on the Board or various NARHC committees. *Up to five people per memberships.
- Only Member RHCs have voting rights in the Board Election
- Access to members-only website sections.

For most RHC's, 84% of NARHC Membership Dues is allowable as a business expense on the cost report, with 16% allocated toward advocacy.

PARENT ORGANIZATION and BILLING CONTACT INFORMATION

Application Date: _____

Organization Name:		Website/URL:	
Primary Contact Person:		Title:	
Primary Contact Email:		Phone:	
Billing Address:	City:	St:	Zip:

CLINIC #1 INFORMATION - for RHC's only.

Independent Provider-Based Pending

Clinic Name:		CMS Certification # (CCN):	
Clinic Physical Address:	City:	St:	Zip:
Phone:			
Clinic Contact Person:	Title:	Work Email:	

If applying for membership on more than 1 clinic, please continue to the back of the form.

PLEASE COMPLETE Clinic Information for each additional rural health clinic who **desires membership**. The RHC is the member. Benefits flow down to employees and administrators of the member RHC as well as up to the parent organization and it's employees.

PAYMENT METHOD: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card			
Name On Card: _____	Phone: _____	Amount: \$ _____	
Credit Card Billing Address: _____	City: _____	Zip: _____	
Credit Card Number: _____	Expiration Date: _____	CVV: _____	
<p>Make checks payable to "NARHC" Mail to: 1009 Duke St., Alexandria, VA 22314 Credit Card Payments may be emailed to membership@narhc.org for quicker processing. Questions? 866-306-1961</p>			

CLINIC #2 INFORMATION Independent Provider-Based Pending

Clinic Name:			CMS Certification # (CCN):
Clinic Physical Address:	City	St	Zip
Phone:			
Clinic Contact Person:	Title	Work Email	

CLINIC #3 INFORMATION Independent Provider-Based Pending

Clinic Name:			CMS Certification # (CCN):
Clinic Physical Address:	City	St	Zip
Phone:			
Clinic Contact Person:	Title	Work Email	

CLINIC #4 INFORMATION Independent Provider-Based Pending

Clinic Name:			CMS Certification # (CCN):
Clinic Physical Address:	City	St	Zip
Phone:			
Clinic Contact Person:	Title	Work Email	

CLINIC #5 INFORMATION Independent Provider-Based Pending

Clinic Name:			CMS Certification # (CCN):
Clinic Physical Address:	City	St	Zip
Phone:			
Clinic Contact Person:	Title	Work Email	

CLINIC #6 INFORMATION Independent Provider-Based Pending

Clinic Name:			CMS Certification # (CCN):
Clinic Physical Address:	City	St	Zip
Phone:			
Clinic Contact Person:	Title	Work Email	

If more than 6 clinics, copy this page

Upcoming NARHC Conference and Course Dates:**NARHC Conferences****2026 Spring Institute**Loews Atlanta Hotel - Atlanta, GA
March 16-18, 2026 (Mon-Wed)**2026 Fall Institute**Loews Atlanta Hotel - Louisville, KY
March 16-18, 2026 (Mon-Wed)**CRHCP Online Courses****Spring 2026**

Enrollment Begins: January 12, 2026

Course Begins: February 9, 2026

Final Exam: April 20-24, 2026

Fall 2026

Enrollment Begins: ??????

Course Begins: ??????

Final Exam: ??????