

■ 2026

Business Membership Application

LeadingAge[®]
Virginia

Organization Information :

Organization Name :

Website

Legal Name (if applicable)

Phone Number :

Address :

City | State | Zip :

Check One:

☐

LLC

☐

Corporation

☐

Sole Proprietor

Short Company Description (2-3 sentences)

Formal Company Description

What type(s) of goods and/or services does your organization provide? (Please select all that apply)

☐

Accounting/CPA

☐

Interior Design

☐

Advertising/Marketing/PR

☐

Legal Services

☐

Architecture/Planning

☐

Management Consulting

☐

Construction Services

☐

Medical Equipment

☐

Environmental Services

☐

Medical Supplies

☐

Facilities Management

☐

Pharmacy

☐

Financial Services

☐

Rehabilitation

☐

Food & Dining Services

☐

Tax Services

☐

Furniture & Furnishings

☐

Technology

☐

Health Care Services

☐

Technology: Software

☐

HR Consulting

☐

Transportation

☐

Insurance & Risk Management

☐

Other

Describe
Other:

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What is your reason for joining?

- | | |
|--|--|
| ☐ Build Meaningful Relationships with Senior Living Leaders | ☐ Access Exclusive Networking Events |
| ☐ Showcase Your Expertise in the Aging Services Field | ☐ Support for Non-Profit Sector |
| ☐ Increase Your Brand Visibility | ☐ Enhance Your Thought Leadership and Credibility |
| ☐ Influence the Future of Aging Services | ☐ Gain Year-Round Promotion & Recognition |
| ☐ Other | <input type="text"/> |

How did you learn about LeadingAge Virginia?

What membership tier are you interested in?

- | | |
|--|---|
| ☐ Preferred Elite Sponsorship (annual fee \$30,000) | ☐ Gold Sponsorship (annual fee \$7,000) |
| ☐ Diamond Sponsorship (annual fee \$18,000) | ☐ Business Membership (annual fee \$800) |
| ☐ Platinum Sponsorship (annual fee \$10,000) | ☐ Small Business Membership (annual fee \$400) |

Primary Contact Information :

Main Point of Contact, will be featured in membership directories.

Name :		Phone :	
Title :		E-Mail :	

Invoice Contact Information :

Primary contact for billing and invoices.

Name :		Phone :	
Title :		E-Mail :	

Marketing Contact Information :

Primary contact for marketing and annual conference communications.

Name :		Phone :	
Title :		E-Mail :	

Who else in your organization would benefit from engaging with and hearing from us?

Attach a staff directory.