**MANITOBA ASSOCIATION OF HEALTH INFORMATION PROVIDERS**

**2024 Membership Year**

Membership is open to any person or organization interested in the objectives of the Association.

The membership year extends from January 1st to December 31st

**Membership Rates**

**Institutional $50.00** (allows 2 staff voting privileges)

**Professional Librarian $30.00**

**Library Technician/Library Assistant $20.00**

**Student $10.00** any student currently enrolled in a relevant university or college program.

**Personal Name** (or name of organizational representative):

**Organization Name:**

**Address**:

**City/Town:** **Prov.: Postal Code:**

**Phone:**

**Email:**

**CHLA/ABSC member**? YES NO

**Mailing address:** Same as above: See below:

**Address:**

**City/Town**  **Prov.:** **Postal Code:**

**Phone:**

**Email:**

****Return your completed form to:

**TREASURER**

**Manitoba Association of Health Information Providers**

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