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Hospital Auxiliaries
of Kansas

THE ORGANIZATION FOR
HOSPITAL
VOLUNTEERS



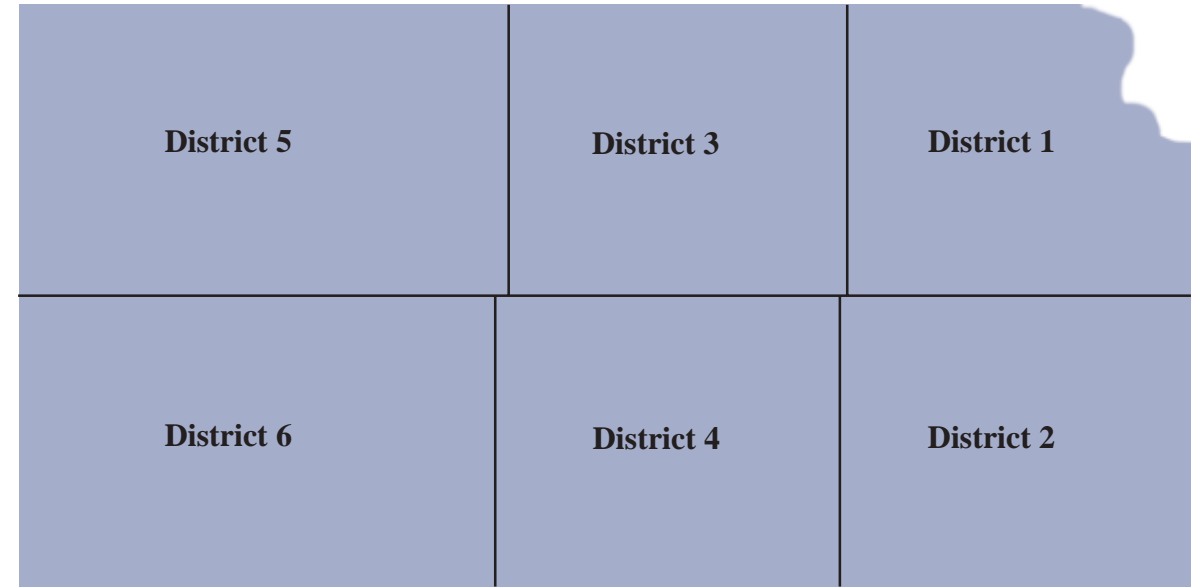
an Allied
Organization
of the
Kansas Hospital
Association



ABOUT Us

The HAK Board of Directors is composed of auxiliary leaders from all areas of Kansas. The HAK Board is the coordinating body for all of the activities of our organization, sets policy and plans all of the educational meetings.

The Hospital Auxiliaries of Kansas is divided into six (6) districts. Each is represented on the Board by a District Coordinator who is responsible for assisting the local auxiliaries. They also handle much of the communication with the groups in their area and will visit them when invited.



Members of each district meet annually for an educational meeting. State Auxiliary Leaders from HAK present interesting information from national volunteer conferences, and legislative information is always included. Member auxiliaries report on their local activities and share information about their special and successful projects with the other auxiliaries in their area.

For more information regarding the Hospital Auxiliaries of Kansas (HAK), go to <http://www.kha-net.org> and click on "Allied Organizations" and "HAK."

HAK MISSION STATEMENT

Hospital Auxiliaries of Kansas provides assistance, communication and education to local hospital auxiliary organizations and supports the established goals of the Kansas Hospital Association to promote better health care in our state.

OUR GOALS

The goals and objectives of the Hospital Auxiliaries of Kansas are to:

- Establish a statewide volunteer network to foster health care volunteerism at the grassroots level;
- Provide educational programs and services to increase the knowledge and skills of health care volunteers;
- Develop volunteer leadership;
- Create awareness of health care issues and encourage public support of the Kansas community health care system.

HAK PURPOSE

The purpose of this association shall be to:

- Act as a coordinating body for its member auxiliaries;
- Assist in the organization of hospital auxiliaries;
- Develop leadership;
- Promote community awareness;
- Promote benefits and objectives of member auxiliaries;
- Work with the Kansas Hospital Association (KHA) in the promotion of better health care.

AN INVITATION TO JOIN HAK

Since 1952, the Hospital Auxiliaries of Kansas has promoted and supported strong, viable health care volunteerism in Kansas hospitals. We invite you to join us in supporting the volunteer efforts in our hospitals.

MEMBER BENEFITS

- Receive four (4) issues of the official newsletter *The Sunflower Auxilian*, which contains many ideas about successful fundraising and service projects.
- Receive the HAK roster containing name and contact information of all local auxiliary presidents, HAK Board members and KHA officials.
- Members may attend annual district meetings held in the spring and:
 1. Receive information from national volunteer meetings;
 2. Learn from new ideas shared by other auxiliaries;
 3. Hear current legislative information.
- Receive assistance with problems upon request. HAK also helps with the start of new auxiliaries and revitalization of existing organizations.
- Access to the HAK resource library.
- Members may attend the annual HAK Convention for a small fee per person and have the opportunity to:
 1. Attend KHA programs;
 2. Learn about a variety of health-related topics;
 3. Receive cutting-edge information;
 4. Learn about national trends in volunteering.

MEMBER DUES

Number of Licensed Beds	HAK Dues	Number of Licensed Beds	HAK Dues
0 - 40 beds	\$ 30 per year	301 - 400 beds	\$115 per year
41 - 75	\$ 40	401 - 500	\$125
76 - 100	\$ 50	501 - 600	\$135
101 - 150	\$ 70	601 - 700	\$145
151 - 200	\$ 80	701 - 800	\$155
201 - 250	\$ 90	801 - more	\$165
251 - 300	\$100		

HAK MEMBERSHIP APPLICATION

Volunteer organizations serving Kansas hospitals are eligible for membership in HAK. Return this completed form and dues check payable to Hospital Auxiliaries of Kansas. **Associate memberships are available at \$10 per year for individuals interested in the goals of HAK.**

Auxiliary Membership

Auxiliary Name _____

Contact Person _____ Title _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

Number of Licensed Beds _____

Associate Membership

Name _____

Title (if any) _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

Return Application to:

**Hospital Auxiliaries of Kansas
c/o Kansas Hospital Association
215 SE 8th Avenue
Topeka, Kansas 66603-3906**