
Invoice for Non-Refundable Processing Fee
Nationwide Children's Hospital Application for Medical Staff Appointment
(fee must accompany completed application)

Make check payable to Staff Activities Fund
in the amount of \$125.00, per application.

Please retain a copy for your records.

Return To:
Nationwide Children's Hospital
Medical Staff Office
Ross Hall 1st Floor
700 Children's Drive
Columbus, Ohio 43205

Practitioner's Name: _____

Check Number: _____

Date of Check: _____

Amount of Check: _____