



Pima Dental Study Club, Inc.  
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www.pimadentalstudyclub.com

### 2026 Membership Application

Annual Membership Dues: \$315

Includes 1 prepaid 2026 CE registration fee.

(Add \$10 for Paypal payments)

(Late registration fee extra, not transferable.)

PDSC membership is granted to individuals on a calendar year basis. Dues are waived for new dental school graduates who apply for membership in the same year that they graduate. For established dentists, dues are \$205 after June 30. Submit application with dues which can be paid by check, bill pay, Zelle or Paypal.

#### Please Print

Name: First, MI, Last, Designations \_\_\_\_\_

Clinic Name: \_\_\_\_\_

Practice Owner  Associate  Retired  Resident  Corporate  Other

Preferred Mailing Address:  Clinic  Alternate

Clinic Address: City/State/Zip Code \_\_\_\_\_

Alternate Address: City/State/Zip Code \_\_\_\_\_

Primary Phone: *circle one* clinic/cell/home/other \_\_\_\_\_

Alternate Phone: *circle one* clinic/cell/home/other \_\_\_\_\_

Primary Email: \_\_\_\_\_

Alternate Email: \_\_\_\_\_ Website: \_\_\_\_\_

#### Education

Pre-Dental School \_\_\_\_\_

Degree(s) \_\_\_\_\_ Year Graduated \_\_\_\_\_

Dental School(s) \_\_\_\_\_

Degree(s) \_\_\_\_\_ Year Graduated \_\_\_\_\_

Dental Specialty/Practice Area \_\_\_\_\_

Have You Had A License Revoked?  Yes  No If Yes, Through What Component? \_\_\_\_\_

How did you hear about PDSC? \_\_\_\_\_

Would you be interested in presenting a CE program to the club?  Yes  No Topic \_\_\_\_\_

Would you be interested helping the club plan CE programs?  Yes  No Topic \_\_\_\_\_

CE topics of Interest \_\_\_\_\_

PDSC collects these details to register you as a member and keep you apprised of club activities. Member contact information is not shared with other parties. A club directory and bylaws are available to members for personal reference upon request. PDSC uses email for member correspondence and all event notices. USPS is used for invoicing and special correspondence. Your signature indicates your express acceptance of club email correspondence, meeting registration and club policies, and agreement to keep us apprised of any contact point updates. Dues may be submitted by check or by card to Zelle or Paypal at pimadental@gmail.com.

Signature \_\_\_\_\_ Date \_\_\_\_\_