



Pima Dental Study Club, Inc.
 PO Box 65832, Tucson, AZ 85728
 (520) 326-5567
 pimadental@gmail.com
 www.pimadentalstudyclub.com

Membership Application
 Annual Membership Dues:
\$200.00
 Submit application with dues.

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 prorated by half after June 30.

Please Print

Name: First, MI, Last, Designations _____

Clinic Name: _____

Practice Owner Associate Retired

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 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. There is a Paypal link on our website as well.

Signature _____ Date _____