6527 W Silver Sage Ln • Phoenix, Arizona 85083 (602) 769-9163 • info@phxobgynsociety.org

www.phxobgynsociety.org

## **APPLICATION FOR MEMBERSHIP**

Eligibility in either the American Board of Obstetrics and Gynecology or American Osteopathic Board is required for Active Membership. Non-physicians with a professional interest in OB/GYN may apply for Associate Membership. All applicants must be approved by Executive Committee.

name:			crede	ntiais:
Office Address:			Office Telephone:	
City:	State/Zip:	Of	fice Fax:	
	orint clearly) ail will be used to send you n			
In Association v	vith:			
Referred by (So	ociety Member):			
Hospital Staff A	Appointments			
Hospital			Staff Category	
Medical Practice	e: Private Practice or Full	Time Emplo	vment	
Dates			Type of Practice	
Signature of Applicant				 Date
	Dues: Active	s \$549, Reti	ted C.V. to address a red \$299, Affiliate \$2 5 – June 2026	
MCVisa #		Exp	3digit code	Billing ZIP
	Ch	eck #		

Or pay online through paypal: <a href="https://www.phxobgynsociety.org">www.phxobgynsociety.org</a> – click on "Dues" tab