



**pima dental**  
study club

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: \$150.00**

Membership is granted to individuals on a calendar year basis. Membership dues are waived through the end of the calendar year for new dental school graduates who apply for membership. For established dentists, dues are prorated by half to \$75 after June 30. Submit membership applications with dues in the form of a check or cash.

### Please Print

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

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

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 \_\_\_\_\_ Year Graduated \_\_\_\_\_

Dental School \_\_\_\_\_

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

Dental Specialty \_\_\_\_\_

Have You Ever 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 \_\_\_\_\_

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