

Medical Student AMSA Membership Application

American Medical Student Association, 1902 Association Dr., Reston, VA 20191

Phone: (800) 767-2266 Fax: (703) 620-5873 Web: www.amsa.org Email: members@amsa.org

Medical students enrolled in or on leave of absence from any LCME or AOA accredited or provisionally accredited North American allopathic or osteopathic training program are eligible for membership.* Please see below for membership dues; dues are in U.S. currency. * *Medical students enrolled in any program listed in the International Medical Education Directory of the Educational Commission for Foreign Medical Graduates, please sign up on the International Medical Membership Application.*

SPECIAL PROMOTION*

We are offering a FREE gift to our U.S. medical members that sign-up through their chapter's recruitment drive between May 1-October 31, 2008. Available at local chapter level only. See your chapter officer to make sure your chapter is participating in this special offer. Not sure who your officer is? Email Jennifer at vmartel@amsa.org or call membership services at 1-800-767-2266.

To be eligible for this FREE Gift, you **MUST** present this AMSA membership application with payment, along with the Bank of America credit card confirmation sheet from www.amsacreditcard.com, to your chapter officer during your chapter's recruitment drive (be sure your chapter is participating in this offer). Make sure your computer is connected to a printer as the pop-up confirmation screens will become inaccessible after you've clicked off them.

*Special promotion subject to change without notice and must be redeemed by Oct. 31, 2008.

PLEASE TYPE OR PRINT CLEARLY

Renewals include your AMSA ID# _____

First Name _____ Initial _____ Last Name _____

Street Address _____ Apt/Room _____

City _____ State _____ Zip _____

Phone Number _____ E-mail Address _____

Medical School and Location _____

Graduation Date _____ SSN _____ Gender _____ DOB _____

Members are entitled to receive, at no additional charge, *The New Physician*. Please check: YES NO, don't send me *The New Physician*

ACTION THROUGH OUR COMMITTEES: These committees are open to all members: Community and Environmental Health; Culture of Medicine; Gender and Sexuality; Global Health; Race, Ethnicity and Culture in Health; and Student Life; as well as Education; Grassroots Leadership; Humanism in Medicine; and Policy. You can access their web pages at www.amsa.org.

INTEREST GROUPS (IGs) & SPECIALTY FORUMS (SFs): These groups maintain listserves to help you stay in touch with others who share your interests. The current IGs are: Business in Medicine, Death & Dying, Direct Action, Mental Health, Military Medicine and Naturopathic Medicine. SFs include: Child & Adolescent Health, Geriatrics, Neurology, Osteopathic Medicine, Preventive Medicine, Primary Care and Surgery.

DUES AND FEES—Dues are in U.S. Currency. (Please check one:)

1st-year medical student: \$75 for up to 5 years of medical school training*

2nd-year medical student: \$75 for up to 4 years of medical school training

3rd- year medical student: \$55 for up to 3 years of medical school training

4th-year medical student: \$55 for up to 2 years of medical school training

* *Medical school taking longer than 5 years is an additional \$20 per year after the fifth year.*

TOTAL ENCLOSED: \$ _____ Payment enclosed (make checks payable to AMSA)

Please charge my: VISA MasterCard

Account Number _____ Exp. Date _____

Signature _____ Today's Date _____

Please mail application with your payment to: AMSA Membership Services, PO. Box 2291, Merrifield, VA 22116-2291

AMSA is committed to keeping members informed of important changes in medical education and health care delivery, especially where new and innovative opportunities are available. AMSA will inform its members of beneficial services available from these other entities, subject to approval by the AMSA Board of Trustees. If you do not wish to receive information from these AMSA-approved outside organizations, please indicate:

Do not release my address. Do not release my e-mail address. Do not release my phone number.

MEMBERSHIP DUES ARE NOT REFUNDABLE.

Questions? Call 1-800-767-2266, E-mail members@amsa.org or Visit: www.amsa.org

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