

San Antonio Dietetic Association Membership Application for 2010-2011

Membership year runs from June 1, 2010 to May 31, 2011 (dues are not prorated).

Last Name	<input type="text"/>
First Name	<input type="text"/>
Email	<input type="text"/>
Credentials	<input type="text"/>
ADA #	<input type="text"/>
Licensure	<input type="text"/>
Title	<input type="text"/>
Office Location	<input type="text"/>
Work Address	<input type="text"/>
Work City	<input type="text"/>
State	<input type="text"/>
Zip Code	<input type="text"/>
Work Phone	<input type="text"/>
Work Fax	<input type="text"/>
Pager	<input type="text"/>

Home Address

Home City

State

Zip Code

Home Phone

Home Fax

Home Information Restricted? Yes No

Willing to speak for groups? Yes No

Topics

Bilingual? Yes No

Area of Expertise

Willing to be a volunteer? Yes No

Are you retired? Yes No

If "Yes", please select the areas in which you would like to help:

All Areas

Association Events:

Greeter

Christmas Party

Spring Seminar Planning

Scholarships

Legislative Events:

PAC Fundraising

Day at the Capitol

Public Relations Events:

Health Fairs

San Antonio Fit City Initiatives

Other

Other Information:

List any ADA Dietetic Practice Groups that you are a member of...

List any other associations that you are a member of or hold a position in?

Select all that you apply to:

Medicare

Medicaid

Private Insurance

Do you plan on becoming a Medicare Yes No

provider?

Please turn into:

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