

# Washington State Society of Periodontists Membership Application

We would like to encourage all the Washington State Periodontists to support the society by becoming a member.

**Application for membership** (please type or print clearly)

Date: \_\_\_\_\_

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

Office address: \_\_\_\_\_

Office phone: \_\_\_\_\_ Other phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

- |   |           |
|---|-----------|
| <input type="checkbox"/> Membership Dues & 4 meetings ( \$40.00 Savings!) | \$300.00  |
| <input type="checkbox"/> Dues Only  | \$160.00  |
| <input type="checkbox"/> New Graduate Dues                                | \$ 80.00  |
| <input type="checkbox"/> Retired Member Dues                              | \$ 80.00  |
| <input type="checkbox"/> Current Student                                  | NO CHARGE |

Each individual meeting \$ 45.00 if paid separately for members and \$ 28 for students.

Return completed form with check payable to the WSSP, to the following address:

Washington State Society of Periodontists  
21807 76th Ave. W.  
Edmonds, WA 98026

Attn: Dr. Jung Song