



# American Osteopathic College of Dermatology

## AMERICAN OSTEOPATHIC COLLEGE OF DERMATOLOGY

P.O. Box 7525, Kirksville, MO 63501  
800-449-2623 --- 660-627-2623 (fax)

### MEMBERSHIP RENEWAL NOTICE

(Please type or print)

Name \_\_\_\_\_

AOA # \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Office #1 Address \_\_\_\_\_  
Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Office #1 Telephone \_\_\_\_\_ Office #1 Fax \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Preferred Mailing Address \_\_\_\_\_  
Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home Mailing Address \_\_\_\_\_  
(CONFIDENTIAL) Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home Telephone \_\_\_\_\_ Spouse \_\_\_\_\_  
(CONFIDENTIAL)

ANNUAL DUES: Payable for calendar year: January 1 – December 31

Fellow:	\$300	\$ _____
Associate:	\$300	\$ _____
Affiliate:	\$300	\$ _____
Resident:	\$ 75	\$ _____

ADDITIONAL CONTRIBUTIONS: AOCD is a not-for-profit organization, contributions are tax deductible.

AOCD Educational Research Fund	\$ _____
Koprince Award	\$ _____
AAD Camp Discovery	\$ _____
Foundation for Osteopathic Dermatology	\$ _____

You may renew online at [www.aocd.org](http://www.aocd.org). Please return completed renewal with check made payable to the American Osteopathic College of Dermatology or provide the requested credit card information.

Credit Card \_\_\_\_\_ Expiration Date \_\_\_\_\_

Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ Name appearing on card \_\_\_\_\_  
(please print)

Authorized Signature \_\_\_\_\_