

RALEIGH-WAKE COUNTY DENTAL SOCIETY MEMBERSHIP APPLICATION AND DUES STATEMENT

PLEASE NOTE: ALL MEMBERS (INCLUDING LIFE MEMBERS) MUST COMPLETE THIS FORM ANNUALLY.
PLEASE HIGHLIGHT NEW OR RECENTLY CHANGED INFORMATION.

PLEASE PRINT LEGIBLY Membership Year _____ New _____ Renewal _____

Name _____ Nickname _____
(Last) (First) (Middle)

Mailing address _____

City _____ Zip _____

Bus Ph _____ Fax _____ Home Ph _____ Cell Ph _____

E-mail address _____

Practice Website address _____

Education Background - _____
Dental School Attended/Degree) (Advanced or Specialty Training/School)

Type of Practice: General / Ortho / Pedo / Endo / Perio / Oral Surg / Pros / Public Health / Path / Radiol / Orofac Pain

Membership Classifications (Please Check One)

- ___ **A. Active Member** - A person who is licensed to practice dentistry in North Carolina and resides in Wake County or whose professional practice site is in Wake County may be elected to Active Membership..... **\$360.00***
- ___ **B. Associate Member** - A person who holds a professional dental degree and is currently practicing may be elected to Associate Membership..... **\$360.00***
- ___ **C. Life Member** - A dentist who has reached age 65 and has been a member of the Raleigh-Wake County Dental Society for the previous 10 consecutive years. Upon application in writing to the Treasurer, dues will be assessed at fifty percent (50%) of the regular Active Member fee. **Life Members approved prior to December 6, 2018 will remain exempt from dues payment, however contributions and assessment payments are encouraged** **\$217.50***
- ___ **D. Disabled Active** - A member in good standing who has incurred or developed a physical condition that renders the person incapable of performing clinical dentistry for an extended period of time or permanently. Application must be made in writing to the Executive Board. There is no fee for this classification..... **\$75.00***
- ___ **E. Honorary/Emeritus** - A dentist who has reached age 65 and has been a member of the Raleigh-Wake County Dental Society for the previous 25 consecutive years. Upon application in writing to the Treasurer, dues will be waived, however a \$50 dinner fee is charged. **\$75.00***

*A \$75 voluntary contribution to the RWCDs Foundation is included. The Foundation is a 501(c)(3) organization and donations are tax deductible. Among other dental health related endeavors, the Foundation is supportive of Wake Tech's Hygiene & Assisting programs, Poe Center for Health Education, Wake Smiles, Wake County's Children's Dental Health Month, UNC SOD, NC MOM, and Give Kids A Smile Day. Please increase or decrease the amount of your donation as you deem appropriate.

Dues are due on or before January 1, 2019 and are considered late if not paid by February 1, 2019
MAKE YOUR DUES CHECK PAYABLE TO THE RALEIGH-WAKE COUNTY DENTAL SOCIETY AND MAIL TO:

RALEIGH-WAKE COUNTY DENTAL SOCIETY c/o Dawn Harris
6601 Cross Meadow Ct.
Fuquay Varina, NC 27526

For additional information: Please contact the Administrative Assistant, Dawn Harris
AdminAssistant@rwcds.org or 919-696-5156