JOIN Today...Be a part of organized medicine and join the Bronx County Medical Society & the Medical Society State of NY

2021 - Membership Application

Dues Cycle: October 1, 2021 to September 30, 2022.

Last Name		First Name	
Business Address:			
City	State	Z	ip Code
Telephone	Fax	E	mail
Medical School		Graduated	License #
Date of Birth Specialty		Specialty	
<u>Membership</u>	Classification & Due	es Rates –Please ch	<u>neck one</u>
□ FULL TIME ACTIVE MEM	IBERSHIP - \$775		
GROUP PRACTICE MEMI		•	¥ •
□ YOUNG PHYSICIAN - \$210 Increases gradually over 3 yea (YP- if you are filing for WC)	urs (YP1) – Dues \$210) - (YP2) – Dues \$3	85 -(YP3) – Dues \$585
PART TIME PHYSICIAN -	\$385 - (Working less	than 20 hours per w	veek)
(MAKE CHECK PAYABLE TO "BRONX COUN	TY MEDICAL SOCIETY" OR C	REDIT CARD Visa, MasterC	ard or AMEX) \$
Card # 🗆 🗆 🗆 🗕 🗆 🗆			
Expiration Date			
	_		Signatu

Bronx County Medical Society

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