

RHODE ISLAND UROLOGICAL SOCIETY

235 Promenade Street, Suite 500, Providence, Rhode Island 02908 (401) 331-3207

MEMBERSHIP APPLICATION

PLEASE PRINT AND RETURN TO THE SOCIETY'S OFFICE

1. NAME: _____ D.O.B: _____

OFFICE ADDRESS: _____

HOME ADDRESS: _____

4. TELEPHONE: HOME _____ OFFICE _____

5. WHERE WOULD YOU LIKE TO RECEIVE SOCIETY MAILINGS? HOME _____ OFFICE _____

Please include years for question 6 - 9.

MEDICAL SCHOOL _____

INTERNSHIP _____

RESIDENCY _____

FELLOWSHIP _____

10. HOSPITAL AFFILIATIONS

PRIVILEGES

11. ACADEMIC APPOINTMENTS:

12. AMERICAN SPECIALTY BOARD (S) CERTIFICATION

YEARS

13. ARE YOU A MEMBER OF THE AMERICAN UROLOGICAL ASSOCIATION? YES _____ NO _____

14. SIGNATURE _____ DATE _____