



Pennsylvania Neurological Society

Application for **Active** Membership

Full Name _____
(Last First Middle) MD / DO / PA / NP

Office/Clinic Name:	Residence Address:	
Office Address	Home Address	
City, State Zip	City, State Zip	
Office Phone:	Home/CellPhone:	
Email:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	
Pennsylvania State License #:	Date Issued:	
Date of Birth:	Birth Place:	

Please place an "X" here: ____ if you would prefer not to have your information available online.

Medical School (include location) _____

Residency _____

Professional Memberships: _____

I hereby apply for membership in the PNS, submitted my \$100 dues and agree to abide by its Bylaws and the Principles of Medical Ethics. In consideration of the PNS processing my application for membership, I grant permission and consent for their obtaining verification of the above information.

Signature: _____ **Date:** _____

* **Active** Members shall be those physicians and APPs engaged in the practice of neurology in Pennsylvania who pay voluntary dues as set forth in Article IV. This entitles them to vote on issues before the membership, eligibility to serve on the Board of Directors including holding an office, and eligibility for financial and professional benefits as determined by the Board.

ACTIVE Membership Benefits: *Your membership dues will provide you:*

- **Registration fee waived** for Annual Meeting providing the latest updates in neurology
- **Free** posting for your practice listing ("position available") on web site upon request
- **Free** listing for your office contact information on the PNS web site upon request
- **Free** professional biographical sketch on PNS web site upon request
- Vote on PNS business and elections of Board members and Officers
- Active members have the opportunity to hold office and serve on the Board

❖ Please return completed application with membership dues to: **Pennsylvania Neurological Society**
204 Saint Charles Way, Unit 342E
York, PA 17402-4645

Questions? Contact Tammy Barclift at the PNS at (717) 851-4585, or at tbarclift@wellspan.org