



2017 Membership Application

Date: _____ New Applicant: _____ Renewal: _____

Name & Title: _____

Certification(s): _____

Institution: _____

Street address: _____

City: _____ State: _____ Zip+4: _____

Phone: _____ Fax: _____

E-Mail Address: _____

Years in present position: _____ Years in Hospital/Medical Field: _____

Education: _____

Membership Period – January 1, 2017- December 31, 2017

Active members shall be those individuals having responsibility in medical services and credentialing activities. Active members shall pay dues and shall be eligible to hold office. Active members are encouraged to join the National Association of Medical Staff Services and their local chapter organization.

Dues: Annual membership dues are \$30.00 and are due and payable January 1st. Dues are delinquent on March 1st. Dues postmarked on or after April 1st will need to include a \$5.00 late fee.

Benefits of membership: Emails and notification of items of interest to the Medical Staff Professional, discounted registration fee to the annual state educations conference, access to other Medical Staff Professionals regarding best practices.

Mark your calendars now for the 2017 State Conference to be held in Pigeon Forge, TN from May 31st – June 2nd, 2017.

Please send the completed application form along with your check made payable to:

Tennessee Association of Medical Staff Services

Sherry Anderson
2460 Petty Road
Charlotte, TN 37036