



North Carolina Society of Gastroenterology Membership Renewal Form

Active Membership for MD's and DO's (Dues \$150 – 1 year, \$425 – 3 years)

Must have authentic medical or osteopathic licensure; be in good standing in the community and of sound moral and ethical nature and free of any felony conviction; must have board certification or fulfill the criteria for eligibility for board certification in gastroenterology.

Allied Health Membership (Dues \$100 – 1 year, \$275 – 3 years)

For Allied Health professionals in the field of gastroenterology.

Associate/Trainee Membership (Dues \$0)

For Fellows or Residents during the period of subspecialty training in gastroenterology; these members will not pay dues and may not vote.

Member Name _____ Member No. _____

Office/Practice _____

Address _____ Zip _____

Phone _____ Fax _____

Preferred E-Mail _____

Check here if Fellow Year of graduation _____

Dues can be paid by VISA or MasterCard (you will receive a receipt by e-mail). **Send to secure fax to 704-376-3173** or by mail to the address below.

Account No. _____ Expiration Date _____

3-digit security code _____ Amount _____

Signature of Card Holder _____

Printed Name of Card Holder _____

Please make your check payable to NCSG and mail to:

North Carolina Society of Gastroenterology
Sandi Buchanan, Executive Director
1112 Harding Place, Suite 200
Charlotte, NC 28204
sbuchanan@meckmed.org
704-376-3688 / 704-376-3173 (fax)

NCSG is a 501(c)(3) organization, dues can be either a charitable deduction or business expense.