



Membership Application

Lifetime Membership for Physicians—\$2,500

The Lifetime membership category provides full membership with voting rights to members who reach 60 years of age. There is no time frame for membership required before you can become a lifetime member. Those who join as a Lifetime Member have no further membership dues in their lifetime.

Member Information

Name: _____ DOB: ____/____/____

Title: _____

Email: _____ Degree(s): _____

Work Phone: _____ Cell Phone: _____

I would like to receive occasional text alerts about upcoming membership activities and STFM events

Institution: _____

What is your academic emphasis? (check all that apply)

Residency Education Medical Student Education

I am not involved in the education of residents or students

Preferred Mailing Address Home Office

Line 1: _____

Line 2: _____

City: _____ State/Prov. _____

Country: _____ Zip Code: _____

Method of Payment

Card Number: _____ Exp: _____

Card Holder's Name: _____ Card Type: Visa/Mastercard

Email Receipt to: _____ AmEx

Check

Mail: Society of Teachers of Family Medicine
11400 Tomahawk Creek Parkway, Suite 540
Leawood, KS 66211

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Email: seggers@stfm.org

Questions? Contact Sarah Eggers at 913-906-6000 x 5409