



2015-2016
Membership Application

By completing this application you are joining a tripartite professional organization and will be a member of the American Dental Association, American Student Dental Association, Minnesota Dental Association, and the Minnesota Student District Dental Society. Membership is from January 1 to December 31.

Name _____ Phone _____

Street _____

City _____ State _____ Zip Code _____

Email Address: _____

Birth Month/Date/Yr. _____ Expected year of graduation _____

Applicant's signature _____ Date _____

Qualifications:

1) A student enrolled in the University of Minnesota School of Dentistry who is in pursuit of a Doctor of Dental Surgery degree who has been accepted as a member of the Minnesota Student District Dental Society.

Privileges: MDA Student Member

A student member in good standing shall receive annually a certificate of membership; free group life insurance; a subscription to Northwest Dentistry, the subscription price of which shall be included in the annual dues; and shall be entitled to attend any scientific session of this Association.

Membership Dues:

2015 ASDA Dues	\$80.00
2015 MDA Dues	\$10.00
2015 MSDDS Dues	\$13.00
2015 ADPAC (voluntary contribution)	\$5.00
TOTAL without ADPAC	\$103.00
TOTAL with ADPAC	\$108.00

Amount Enclosed: _____ (make check payable to **MDA** and mail to:
MDA, Attn: Dawn Jensen, 1335 Industrial Blvd Ste 200, Minneapolis, MN 55413)

Or fax credit card payments to: 612-767-8500

Credit Card Number: _____ Exp Date: _____

Signature: _____ Date: _____