Invite a Peer to Join!



SOUTHEASTERN ACADEMY OF PROSTHODONTICS Membership Application

Please see membership application procedure on reverse side for requirements/fees.

| Full Name | | | | |
|--|--------------------|-------------------|------------------------|--------------------------|
| Business Address | | | Phone # | |
| City: | State: | Zip Code: | Email: | |
| Home Address | | | _ Cell # | |
| City | State | _ Zip Code | Pref. Mailing: | Work Home |
| Dental School/Graduation | Date | | _ | |
| Other Academic Degrees (| College/Degree) | | | |
| Years Practicing Dentistry | | Full Time Speci | alty (if any) | |
| Military Service (if any) | | | | |
| Professional/Dental Society | Memberships | | | |
| Professional Publications/A | ccomplishments | | | |
| Post Graduate or Graduate | Course | | | |
| Formal Training in Prostho | dontics (if any) _ | | | |
| Type of Membership Desire | ed: Active | Asso | ociate | _ |
| Applicant's Signature: | | | _ Date | |
| Please return this shee Name on card: | Using a credit of | ard? Visa/Master(| Card/Discover/American | - |
| | | | | |
| • | _ | | | |
| Card Number: | | | _ Expiration Date: | Security Number: |
| PLEASE NOTE CREDI | T CARD INFORM | MATION WILL BE | DESTROYED AFTER PAY | MENT HAS BEEN PROCESSED. |
| How did you hear about | SEAP? | | | |

Membership Application Procedure

REQUIREMENTS: Any member of the Dental Profession residing in one of the states encompassed by the Southeastern Academy and who is in good standing in the American Dental Association, Constituent (state), and Component (local) dental associations, is eligible for membership. A high percentage of the applicant's time and interest should be in Fixed and Removable Prosthodontics.

APPLICATION FORM: Applications shall be forwarded to the SEAP Executive Director, who will be responsible for properly processing the application. Applications which are approved by the Membership Committee and the Executive Council shall be submitted to a vote of the Academy at the Annual SEAP Meeting. An applicant's presence is highly encouraged at the meeting at which he/she is being voted upon to validate the application.

DUES and FEES: The annual dues are \$200.00 per year. The initiation fee for each active member admitted to the Academy is \$25.00. A subscription fee for the Journal of Prosthetic Dentistry (\$185.00 – Print/Online) in addition to other dues, shall be assessed for each member. A check for \$410.00 should accompany the application. This covers the initiation fee, the first year's dues, and the Journal subscription (if you are already receiving the journal through another source, please only send \$225.00).

BYLAWS: A copy of the Southeastern Academy of Prosthodontics Bylaws is furnished to each successful applicant. The Bylaws contain the objective and rules and regulations of the Academy. Further information may be obtained by contacting the SEAP office or an active member.

ATTENDANCE: Attendance is encouraged at each annual meeting.

DEFINITION OF APPLICATION MEMBERSHIP CATEGORIES:

<u>Active Members</u>: Active members must be a resident of one of the following states, and/or conduct his/her primary practice of professional pursuit in one of the following states: Alabama, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, South Carolina, Tennessee, Virginia, or West Virginia.

Associate Members: Associate members shall consist of members of the dental profession who are employed within the geographical are identified above, by the armed services of the United States Public Health Service or other public health services. Admission to the Academy of an associate member shall be in the normal prescribed manner as that for active members. Associate membership carries all the rights, privileges, and responsibilities as those afforded active members of the Academy, except for voting.

An associate member shall not forfeit his membership if he/she becomes a resident of a state outside of the geographical area described above. Any active member who moves out of the geographical area may continue membership in the Academy as an associate member.