

**The Urological Association of Pennsylvania, Inc.
Application for Membership**

PLEASE TYPE OR PRINT all answers. **Return the completed application and remit your dues of \$125 (if applying for Active Membership) to: The Urological Association of Pennsylvania, Inc., 777 East Park Drive, P.O. Box 8820, Harrisburg, PA 17105-8820; (717) 558-7750; (Fax) (717) 558-7841.**

Type of Membership (see reverse) Active (\$125) Associate

Name _____

Office Address _____ Home Address _____

Phone _____ Phone _____

Fax _____ E-mail _____

Date of Birth _____ Preferred Address Office or Home

Medical School _____ Degree _____ Date _____

Residency _____ Projected Date of Completion _____
Place Subject

Board Certification: Yes No Date _____

Certifying Organization _____

Member of: AUA Since _____
 AMA Since _____
 PMS Since _____
 County Medical Society Since _____

Medical Licensure # _____ State _____ Date Issued _____

In active practice of urology (after residency) since _____

Applicant's Signature Date

PREREQUISITES FOR MEMBERSHIP ON REVERSE SIDE

MEMBERSHIP REQUIREMENTS

Section 1. Active Membership

An active member shall have completed an approved residency or preceptorship in urology; or be actively engaged in urological research or the teaching of urology; or be actively engaged in the practice of urology.

Section 2. Associate Membership

(a) Associate membership shall be restricted to (1) urologists in training who cannot fulfill the requirements for active membership but who may be eligible to become active members as soon as the requirements can be met; (2) scientists, physicians in research, and teachers interested in and contributing to the science of urology.

(b) Associate members may enjoy all of the privileges of the Association except the right to vote and the right to hold office. They shall not be subject to regular dues and shall not be liable for any assessments.

(c) Associate members in training who do not qualify for and request active membership in one year shall be dropped from the membership.

Section 3. Senior Membership

(a) Active members in good standing who have reached the age of sixty-five (65) years, or are no longer in active practice, are eligible for senior membership. Such applications must be filed with the Secretary sixty (60) days prior to the Annual Meeting.

(b) Senior members are exempt from dues and assessment.

Section 4. Inactive Membership

(a) Active members who are incapacitated by illness, accident or for other reasons are unable to pursue the practice of their profession and/or to whom the payment of dues would be a hardship, are eligible for inactive membership, upon recommendation of the Executive Committee.

(b) Inactive members shall retain all the rights and privileges of active members but are exempt from the payment of dues and assessments, on the beginning of the next fiscal year immediately following the transfer of membership. The status of members in this classification shall be reviewed annually.

Section 5. Every newly-elected member of the Association shall be furnished by the Secretary with an official notification of his election, together with a copy of the Bylaws.

Section 6. Membership application forms may be obtained from the Secretary. Approval by the Executive Committee will be necessary for all classifications of membership.

Section 7. Problems of resignation, reinstatement, and discipline shall rest with the Executive Committee.

Section 8. Any member in good standing in this Association may resign by submitting a letter of resignation to the Secretary. Membership may be suspended or terminated by action of the Executive committee for failure to pay dues or assessments.

Annual dues are currently \$125.

Please enclose a check for \$125 and return it with your completed application to:

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Harrisburg, PA 17105-8820
(717) 558-7750 ext. 1494 or (Fax) (717) 558-7841*