

## **Dallas County Optometric Society Membership Application**

First Name	_ MI	_ Last Name		Designation
Street Address				
City	State _		Zip	
Telephone No		_Email address		
TX Optometry License				
TOA Member? (Please circle or	ne.) Y	N		

DUES: TOA member:\$100 Non TOA member:\$200 If after April 1st, add \$50 for late fee.

This represents no change in dues for our members from last year. If you are not a TOA member, please take the time to join. Due to new state regulations, sponsored meetings have and will continue to become more challenging to obtain. To provide the quality CE that our society has come to expect, we must promptly collect our dues to budget our meeting costs throughout the year. We encourage all member to register today to allow our society to provide the best meetings possible. With that, we will assess a \$50 late fee for members who have not paid by April 1st . We accept cash, checks, and all major credit cards. Please make checks payable to DCOS.

Credit Card Payment (Please circle one.) Visa Mastercard Discover American Express Card
Number \_\_\_\_\_\_
Expiration Date \_\_\_\_\_\_ Security Code \_\_\_\_\_\_ Zip Code \_\_\_\_\_\_
Paid amount (Please circle one.) \$100 \$150 \$200 \$250

## Signature

Please return this application/payments to one of the officers at the next society meeting.