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THREE WAYS TO JOIN/ RENEW:

NAME:

DOB, MONTH/DAY:

1. ONLINE

www.texmedalliance.org

(New members may find physician license number at www.tmb.state. tx.us/page/look-up-a-license

2. CALL

TMA Knowledge Center at (800) 880-7955 with credit card information

3. MAIL

Send this form and check payable to **TMAA**, TMA Alliance, 401 W. 15th Street, Ste. 101, Austin, TX 78701

MEMBER INFORMATION

ADDRESS:		
PRIMARY PHONE:	□ HOME	□ CELL
SECONDARY PHONE:	□ HOME	□ CELL
EMAIL:		
REFERRED BY:		
MEMBER BIRTHDAY:		
ARE YOU A MEMBER OF THE HEALTHCARE PROFESSION? NURSE PHYSICIAN (LIC. #) OTHER		
SPOUSE INFORMATION		
SPOUSE NAME:		
PHYSICIAN'S MEDICAL LICENSE #: (IF APPLICABLE)		
SPECIALTY:		

ANNUAL DUES

☐ Active	\$90
Associate	\$62
☐ Retired*	\$50
☐ Widowed	\$22
☐ Resident	\$0
□ Student	\$0
☐ Fee	\$3
Voluntary Items	
□ TEXPAC	\$55

*Retired category includes both retired physicians and spouses of retired physicians

TEXPAC uses voluntary contributions to financially support state candidates who support the goals of TMA. Texas law permits individuals, professional associations, PACs and certain partnerships and limited liability companies to contribute to political campaigns. TEXPAC may not accept contributions from corporations, labor organizations or foreign nationals who have not been granted permanent residence in the United States. Contributions are not tax-deductible for federal income tax purposes.

State law requires TEXPAC to use best efforts to collect and report the full name and address, principal occupation or job title, and full name of the employer of individuals whose contributions equal or exceed \$500 in a reporting period. To satisfy this regulation, please include your occupation and employer information. Should you have any questions, please call TEXPAC at (512) 370-1363.