

Illinois Chapter of the American College of Surgeons

Membership Application

ACS

Membership #:

(If you are not a current member of ACS, please join here: www.facs.org).

			<u>Annual Dues</u>
Please check one:	<input type="checkbox"/>	Active Fellow	\$100.00 (waived for first year members)
	<input type="checkbox"/>	Associate Fellow	\$0.00
	<input type="checkbox"/>	Surgical Resident	\$0.00
	<input type="checkbox"/>	Medical Student	\$0.00

Name:

Preferred
Mailing
Address:

Preferred E-mail
Address:

Preferred
Phone Number:

Please return this form either by mail or e-mail to:

Illinois Chapter of the American College of Surgeons
c/o Luann White
618 Cascade Rd
Pittsburgh, PA 15221

e-mail: lhwhite26@gmail.com

If you have any questions, please contact Luann White, Executive Director by email at lhwhite26@gmail.com or by phone at 217-415-1500.