

Membership Application

Lifetime Membership for Physicians - \$2,500

The Lifetime membership category provides full membership with voting rights to members who reach 60 years of age. There is no time frame for membership required before you can become a lifetime member. Those who join as a Lifetime Member have no further membership dues in their lifetime.

Member Information

Name:		DOB://
Title:		
Email:	Degree(s):	
Work Phone:	Cell Phone:	
I would like to receive occasional text alerts ab	out upcoming membership activ	vities and STFM events.
Institution:		
What is your academic emphasis? (check all the Residency Education Medical Student E	ducation	
Preferred Mailing Address	Office	
Line 1:		
Line 2:		
City:	State/Prov:	
Country:	Zip Code:	
Method of Payment		
Card Number:	Exp:	CVV:
Card Holder's Name:	Card Ty	vpe: 🗌 Visa/Mastercard
Email Receipt to:		AmEx Check
Mail: Society of Teachers of Family Medicine 11400 Tomahawk Creek Parkway, Suite 540 Leawood, KS 66211	Fax: 913-906-6096 Email: enitcher@stfm.o	org
Questions? Contact Emily Nitcher at 913.800.568	35	