



Maine Chapter, American College of Surgeons Membership Application

Phone: (207) 592-5725
www.maine-facs.org

APPLICANT INFORMATION (Please print or type)

Name: _____
Date: _____
Credentials: _____
Year Born: _____

National ACS Member # _____
Year you became FACS, or Associate Fellow: _____
Primary Practice Type: _____
(Solo, Group, Hospital, Academic, Military, Other)
Primary Practice Specialty: _____
Primary area of Practice: ___ Urban ___ Rural ___ Military

TYPE OF MEMBERSHIP

- ___ \$150 **Fellow** - Must have met all of the requirements and been formally admitted into Fellowship of the American College of Surgeons.
- ___ \$100 **Associate Fellow** - Must be recognized by the American College of Surgeons as an Associate Fellow.
- ___ \$100 **Affiliate** - Non-FACS Physicians, Allied Health Care Professionals, and Nurses.
- ___ \$ 50 **Retired** - Must have been granted retired status by the American College of Surgeons.
- ___ \$ 0 **Resident** - Surgical residents and surgeons in research or surgical fellowship programs who meet the American College of Surgeons requirements for participation.
- ___ \$ 0 **Medical Student** - Medical students in accredited allopathic or osteopathic medical schools, who meet the American College of Surgeons requirements for participation.

CONTACT INFORMATION*

HOME:

Home Address: _____
City: _____ State: ___ ZIP: _____
Home Phone: _____ Fax: _____
Home Email: _____

Email Preference: ___ Home ___ Work

Mailing Preference: ___ Home ___ Work

* Note: contact information is for member communication only.

PAYMENT INSTRUCTIONS

Pay by Check

Make checks payable to: "Maine Chapter, ACS"
Check # _____ enclosed

Pay by Credit Card

Call or email for instructions:
maine@mainefacs.org
(207) 592-5725

WORK:

Employer: _____
Work Address: _____
City: _____ State: ___ ZIP: _____
Work Phone: _____ Fax: _____
Web Address: _____
Work Email*: _____

ADMINISTRATIVE CONTACT PERSON

Name: _____
Phone: _____
Email: _____

Please send your completed form to:

**Maine Chapter, ACS
PO Box 190
Manchester, ME 04351**

The mission of the Maine Chapter of the American College of Surgeons (MEACS) is to educate its members and the public about surgical care within the state of Maine, and to support the mission and goals of the American College of Surgeons.

Payment of dues or other contributions to the Chapter are not tax deductible as charitable contributions for income tax purposes. They may, however, be tax deductible as ordinary and necessary expenses to the extent not allocated to lobbying expenses. The MEACS estimates that the non-deductible portion of your dues is 15%.

Taxpayer ID # for Voucher Use Only: 20-4019098