



# 2017 Annual KCMS Membership Dues

Please complete this form to apply for or renew your Kitsap County Medical Society Dues.  
We are a unified county, which means that in order to be a member of the KCMS, you must also join the WSMA.

Please send payment to the KCMS by 01/30/2016 to be included in the KCMS Membership Directory

Kitsap County Medical Society – <b>Physician Assistant</b>	\$295.00 _____
Washington State Medical Association	\$125.00 _____
Recommended KCMS Foundation Donation (optional)	\$50.00 _____
Kitsap County Medical Society Alliance/Spouse Dues	\$50.00 _____
<b>Total \$ _____</b>	

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Please make checks payable to KCMS (identify the name of the member on the check).

**Please make sure to also include current contact information, particularly e-mail and mailing addresses.**

This will help us to keep you informed of social and business events that are included in your membership.

Member Name: \_\_\_\_\_ Spouse Name: \_\_\_\_\_  
Home Address \_\_\_\_\_  
City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

If paying by credit card please complete the following:

Name on credit card \_\_\_\_\_  
Visa/MC Number \_\_\_\_\_ Exp. Date \_\_\_\_\_  
Amount \$ \_\_\_\_\_ Signature \_\_\_\_\_

**Membership includes many benefits. Please inquire with the KCMS office for details.**

**Thank you for your support with the Kitsap County Medical Society!**

KCMS – PO BOX 490 – Silverdale, WA 98383  
Office/Mobile (360) 689-2928  
[www.kcmedical.org](http://www.kcmedical.org) [kcmsmed@gmail.com](mailto:kcmsmed@gmail.com)