



AMERICAN
HEARTWORM
SOCIETY™
EST. 1974

Membership Application

40 YEARS LEADING THE FIGHT AGAINST HEARTWORM DISEASE

To apply for membership in the American Heartworm Society, please complete this form and mail it with the appropriate dues to

American Heartworm Society
PO Box 1352
Holly Springs, NC 27540

You may also apply online at the
American Heartworm Society website,
www.heartwormsociety.org.

MEMBERSHIP DUES Please Check One One Year: \$55 Two Years: \$100 Three Years: \$135
Make check or money order payable to the American Heartworm Society.

I hereby apply for member status in the American Heartworm Society. As a member, I will have access to all Society benefits, including voting privileges.

Name _____ Dr. Ms. Mr.

Institution Attended _____

Degree/Year _____

Affiliation/Practice Name _____

Status (Practitioner, Industry, Research, Retired, Other) _____

Address _____

City/State/Zip/Country _____

Phone _____ Fax _____

Email Address _____

The American Heartworm Society will keep you informed about important news ("Red Hot Alerts") new practice tools ("Cool Tools") and Think 12 updates via email. If you prefer not to receive these emails, you can opt out by checking this box.

Your membership also includes receipt of the quarterly newsletter *AHS Bulletin*. Please specify whether you wish to receive this via email or mail. Send by mail Send by email

Signature _____ Date _____