



CLINICAL LEADERS IN OBESITY MEDICINE®

MEMBERSHIP APPLICATION

Thank you for your interest in becoming a member of the Obesity Medicine Association (OMA)! As a member, you become part of the largest organization of clinicians dedicated to preventing, treating, and reversing the disease of obesity. View the list of your membership benefits at www.obesitymedicine.org/join.

PERSONAL INFORMATION

FULL NAME _____ DESIGNATION(S) _____

EMAIL ADDRESS _____ PHONE NUMBER _____

mobile home work

STREET ADDRESS _____

home work

CITY _____ STATE _____ ZIP CODE _____ MEDICAL LICENSE # _____

*Required for MDs, DOs, NPs, and PAs**

PRIMARY MEDICAL SPECIALTY

- Endocrinology Family Medicine Gastroenterology Internal Medicine Obstetrics & Gynecology
 Pediatrics Psychiatry Surgery Other _____

MEMBERSHIP SELECTION

- Physician (\$475/year)
 1-Year Membership (\$475) 2-Year Membership - 10% Discount (\$855) 3-Year Membership - 15% Discount (\$1,211)
- Nurse Practitioner or Physician Assistant (\$325/year)
 1-Year Membership (\$325) 2-Year Membership - 10% Discount (\$585) 3-Year Membership - 15% Discount (\$829)
- Associate (\$250/year) *Health care professional who is not a physician, nurse practitioner, or physician assistant.*
- Clinician in Training (\$25/year) *Individual currently enrolled in a medical school, residency program, internship, fellowship program, nursing school, or other medical professional training program. Proof of enrollment required.*

HOW DID YOU HEAR ABOUT OMA? _____

HEALTHCARE PROVIDER DATABASE

OMA is excited to partner with the Obesity Action Coalition (OAC) to provide members with a free listing in OAC's online healthcare provider database. The database allows patients to locate a healthcare provider trained in obesity medicine. Being listed in the database will increase your exposure to potential patients and drive traffic to your practice. (Physicians, nurse practitioners, and physician assistants only.)

OPT OUT from being listed in the healthcare provider database

PAYMENT INFORMATION

CREDIT CARD NUMBER _____ EXP. DATE ____/____

If you prefer to pay by check, please make your check payable to OMA and enclose it with this application.

SIGNATURE _____

HOW TO SUBMIT

MAIL: Obesity Medicine Association FAX: 303.779.4834
101 University Blvd.
Ste. 330
Denver, CO 80206

VISIT OBESITYMEDICINE.ORG/JOIN TO LEARN ABOUT YOUR MEMBER BENEFITS!
QUESTIONS? CALL [303.770.2526](tel:303.770.2526) OR EMAIL MEMBERSHIP@OBESITYMEDICINE.ORG

Note: OMA membership dues are deductible as a normal business expense. However, federal tax law disallows deductions related to certain types of lobbying. OMA estimates that in 2018, 4% of dues will be used for lobbying activities, so 96% of your dues are deductible as a normal business expense. *To maintain your membership as a physician, nurse practitioner, or physician assistant, you are required to have a valid active medical license on file. If for any reason your medical license gets revoked, it is your responsibility to notify OMA immediately. No refunds will be granted for memberships terminated due to invalid medical licenses.