



ALABAMA ORTHOPAEDIC SOCIETY
1085 Chesson Hill Drive
Fitzpatrick, AL 36029
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AOS 2024 Membership Dues

We value your participation in
Alabama Orthopaedic Society

REGISTRATION & PAYMENT

Name _____

Practice Name _____

Address _____

Address 2 _____

City, State Zip _____

Check One Category:

- | | |
|--|--------------|
| <input type="checkbox"/> Active | \$300.00/yr. |
| <input type="checkbox"/> Senior (Retired) | No Charge |
| <input type="checkbox"/> Resident / Fellow | No Charge |

Sub-specialty (please include for AOS website search) _____

Check payable to Alabama Orthopaedic Society

Mail to:

Alabama Orthopaedic Society 1085 Chesson Hill Dr., Fitzpatrick, AL 36029

☐ **Group Membership**

Practices whose members all join as a Group will receive a **10% discount** off total dues.

Please attach a list of group members

Type of credit card used to pay: ☐ MasterCard ☐ VISA ☐ American Express

Card Number: _____ - _____ - _____ Exp: _____ - _____ CSV: _____

Credit Card Billing Address: _____ Zip Code _____

➤ **Cell:** _____ (will not made public) **E-Mail Address:** _____

Contact AOS Executive Director, Terri Mendez: terri@aosdocs.com

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