

Please Join the South Carolina Association of Orthopaedic Executives! 2009 Membership Dues Notice

To:

We would like to take this opportunity to invite you to join the SCAOE. Please remit payment along with your membership registration card below.

2009 Membership Dues

\$150.00

Please note your membership dues include your registration fee to the 2009 SCAOE Annual Meeting.

Mark your calendars: **2009 Annual Meeting-** The annual meeting will be held August 6-8, 2009 at The Sanctuary at Kiawah Island, South Carolina.

Kind Regards,
Mary Elkins
SCAOE Membership Chair

Membership Registration Information: (Please check the information below for accuracy.)

Name: _____ Title: _____

Practice Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____ Number of Physicians: _____

Please mail to: South Carolina Association of Orthopaedic Executives Or Fax: (813) 949-8994
17503 Mallard Court
Lutz, FL 33559

Credit Card Payment Information:

I hereby authorize the following amount to be charged to my credit card. Amount Authorized: _____

Card #: _____ Visa or Mastercard

Expiration Date: _____ Security Code: (Last 3 #'s on back of Visa/MC) _____

Name as it appears on card: _____

Please note: This \$150 membership is for your State (SCAOE) membership not your National AAOE membership. Membership is on an individual basis not by practice. We do not refund or transfer memberships to new administrators for practices.

Please Note that the Revenue Reconciliation Act of 1993 states that association dues used for lobbying activities are not deductible as a business expense. As a result 10% of SCAOE membership dues cannot be deducted as a business expense for federal income tax purposes.