



ARMA
ARIZONA MEDICAL
ASSOCIATION

2011 MEMBERS BENEFIT

FREE Listing in the *Arizona Medical Association* Membership Directory

First Name	Primary Specialty:
Last Name	
Professional Titles	Board Certified? Y N
Gender	Special interest area of medicine
Office Street Address	
City ST Zip	2nd Special interest area of medicine
County	3rd Special interest area of medicine
Office Phone	Are you willing to speak to the media on these topics? Y N
Office Fax	Willing to speak for CME on these topics? Y N
Email Address	Willing to speak to the public on these topics? Y N
Website	Willing to speak to government / legislators? Y N
Are you involved in a Community Service? Y N	If Yes, please list:
Languages other than English	
Are you verbally fluent in a second language? Y N	If so, what Language:
Verbally fluent including medical terminology? Y N	Fluent writing this language? Y N
Are you verbally fluent in a third language? Y N	If so, what language:
Verbally fluent including medical terminology? Y N	Fluent writing this language? Y N

The *ARIZONA MEDICAL ASSOCIATION* Membership Directory helps guide inquiries for peer networking, media, CME or other speaking opportunities, or government/legislators questions, based on a physician's specific area of interest.

Return form:

Email: srobinson@azmedassn.org, **Fax:** 602.246.1161

Mail to: 810 W. Bethany Hm Rd, Phoenix, AZ 85013

Opt Out - I prefer not to be listed.

Arizona Medical Association will publish your name; however, we are not able to publish your Corporate Practice name.

Any Questions? Contact Shari Robinson at **602.347.6914**.