2012 TDA Dental Team Member Application

For: Hygienists / Assistants / Front Office Educators / Related Dental Fields

"Dental Team Member" is the new name for non-dentist membership in the association, established by the 2008 TDA House of Delegates. The resolution as passed changes TDA "Dental Office Auxiliary Membership," originally established in 1988, to "Dental Team Membership." In addition to the name change, the resolution removes the restriction that membership be extended only to employees of TDA members and expands the allowable membership parameters to include hygienist and dental assistant educators as well as other non-dentists employed in dentally-related fields such as dental benefits administration.

Dental Team Member benefits are substantial but the $50 annual dues remain low. Each Dental Team Member will receive:

- A Dental Team membership card with unique ID number;
- Complimentary TDA Annual Session registration;
- Notification of other TDA meetings;
- Automatic participation in the ACE CE registry; and
- A subscription to the *TDA Newsletter*.

In addition, each Dental Team Member will have access to:

- Continuing education programs;
- TDA insurance products;
- The TDA auto leasing program; and
- The TDA credit card program.

Member Contact Information (please print or type)

○ Mr. ○ Ms. _____
Name (First / Middle / Last)

_____
Primary Address (this address may be used in the TDA Source Book)

_____
City / State / Zip Office Phone

_____
Email Address

_____
Employer

Payment Information

2012 Dental Team Member dues.....$ 50.00

Optional:

I would like to subscribe to the TDA *Journal*
for calendar year 2012 at an annual subscription rate of $9.50 .....$_____

Total Payment .....$_____

Please enclose a check for the total, made payable to the Tennessee Dental Association for 2012 Dental Team Membership dues, which includes a newsletter subscription valued at $6.00. Please return this form with your check to:

Tennessee Dental Association / 660 Bakers Bridge Ave., Ste 300 / Franklin, TN 37067

Category / Affiliation

Check the category that most closely describes your position in the dental office:

○ Dental Hygienist License #:_____

○ Dental Asst. - Registered? ○ Yes ○ No
If yes, Reg. Number:_____

Office Staff:

○ Office Manager ○ Front Office
○ Dental Lab Tech ○ Bookkeeper
○ Insurance Specialist ○ Receptionist
○ Other:_____

Were you a member last year? ○ Yes ○ No

Member ID # if known:_____

TDA District in which your employer is currently a member (check one):

○ First District ○ Sixth District
○ Second District ○ Seventh District
○ Chattanooga Area ○ Eighth District
○ Fourth District ○ Memphis
○ Nashville ○ Employer is a non-TDA member

TDA Use Only: ○ Excel 2012 ○ Accts Rec ○ Cash Rec ○ New Mbr Info ○ Mbr Card ○ ACE ○ Journal Sub