

# GREATER ATLANTA DIETETIC ASSOCIATION

Membership Application: 2007-2008

PLEASE FILL OUT FORM COMPLETELY

## Membership Dues:

- ◆ **ADA Member:** \$25.00
- ◆ **Subscriber (non-ADA Member):** \$50
- ◆ **Students:** \$15

Make checks payable to **Greater Atlanta Dietetic Association** and mail to:

Kerry Newell  
1877 Remington Road  
Atlanta, GA. 30341

Please email completed application form to [knewell@mnidirect.net](mailto:knewell@mnidirect.net) or mail with payment.

**Please PRINT clearly** so that we are better able to serve you.

Please check all that apply:     New Member     Renewing Member (past GADA member)

ADA Member (Member #: \_\_\_\_\_)     Subscriber (not an ADA member)

Student/Intern (School/Internship: \_\_\_\_\_)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Credentials: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

Specialties: (DM, pediatrics, etc) Please list 2. \_\_\_\_\_

Place of Employment & position: \_\_\_\_\_

Preferred Contact Phone #: \_\_\_\_\_ this is: \_\_home, \_\_work, \_\_mobile

**E-mail:** \_\_\_\_\_ **(PRINT CLEARLY)**

Faculty Signature \_\_\_\_\_ (students only!!)

**Newsletters and other GADA mailings will be sent via e-mail.**

**Do you have internet access?** Yes No

Interested in joining a committee? **Please check box only if interested in this.**

- Communications (newsletter/publications, website)
- Fundraising
- Government Affairs/Legislative
- Public Relations (media outreach, National Nutrition Month, speakers' bureau,)
- Membership
- Professional Development (meeting planning)