

## Arizona District Dietetic Association Membership Application

(Membership year is June 1<sup>st</sup> to May 31<sup>st</sup>)

**Please mark the appropriate box for the district association you would like to join:**

- |   |   |
|---|---|
| <input type="checkbox"/> <b>AZDA Central</b> - Greater Phoenix Area | <input type="checkbox"/> <b>AZDA North</b> – Flagstaff/Kingman Area |
| <input type="checkbox"/> <b>AZDA South</b> - Greater Tucson Area    | <input type="checkbox"/> <b>AZDA Southwest</b> - Greater Yuma Area  |

First Name	Last Name	(Maiden/Former Name)	Professional Suffix
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Mailing Address

City	State	Zip Code	ADA Member Number
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Preferred Phone Number	Preferred E-Mail Address
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Current Job Title	Place of Employment
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Congressional District	Legislative District	(This information can be found on your Voter ID card)
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**Are you interested in being a volunteer in your AZDA District?**  **YES**  **NO**

Please let us know in what ways you might want to get involved: \_\_\_\_\_

Comments/Questions? Please contact Patty Williams at [azdietetic@aol.com](mailto:azdietetic@aol.com).

**Qualification of AZDA District Membership:**

American Dietetic Association members residing in Arizona are automatically members of the Arizona Dietetic Association. Any person who is a member in good standing of the American Dietetic Association (ADA) is eligible to become a member of an AZDA District. Members may hold membership in more than one district. The districts appreciate your financial support and your attendance at local meetings and events. ADA dues do not include local District association membership. We rely on your dues to provide local activities.

Please Indicate Your Membership Type:	AZDA Central	AZDA South	AZDA North	AZDA Southwest	Amount Due
<b>Voting Member</b>					
<input type="checkbox"/> Active RD or DTR - Active Member of ADA	\$25.00	\$20.00	\$15.00	\$15.00	\$
<input type="checkbox"/> Retired RD or DTR - Active Member of ADA	\$25.00	\$10.00	\$8.00	\$15.00	\$
<b>Non-Voting Member</b>					
<input type="checkbox"/> Student or Dietetic Intern	\$10.00	\$10.00	\$5.00	\$5.00	\$
<input type="checkbox"/> Associate – Ineligible for ADA membership	\$35.00	\$30.00	\$25.00	\$15.00	\$
<b>Donations</b>					
ADA Foundation					\$
AzDA Donation					\$
Susan Grogan Memorial Scholarship Fund					\$
Rissa Miller Memorial Fund					\$
<b>Total Amount Enclosed</b>					\$

**Please complete this application and mail with a check payable to your specific district association at the following addresses:**

**AZDA-Central**

PO Box 59035  
Phoenix, AZ 85044

**AZDA-North**

c/o Haley Baker  
3279 Eagle Rock Rd  
Kingman, AZ 86401

**AZDA-South**

c/o Misha Vuke  
12531 E. Calle Talon  
Tucson, AZ 85749

**AZDA-Southwest**

c/o Sandi Veitch  
2200 W. 28th Street  
Yuma, AZ 85364.