



# HAWAII MEDICAL ASSOCIATION

1360 S. Beretania St. #200 • Honolulu, HI 96814 • Ph (808) 536-7702 • www.hawaiimedicalassociation.org



## Resident/Student Membership Application - 2018

- Yes, I want to apply for membership in the Hawaii Medical Association and my County Medical Society. Please start my membership today.
- I am applying for American Medical Association membership.

*You can also apply online at [www.hawaiimedicalassociation.org](http://www.hawaiimedicalassociation.org)*

### PERSONAL AND PROFESSIONAL INFORMATION

Name \_\_\_\_\_  
Last First Middle Degree/Credentials (i.e. MD, MPH, FACP)

Gender:  M  F EMAIL: Office \_\_\_\_\_ Home \_\_\_\_\_

I wish to receive email from the American Medical Association, including advocacy initiatives, news for physicians, and products & services.

HOME Address \_\_\_\_\_  
Street Address Suite # City State Zip

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Birthdate (mo/day/yr) \_\_\_\_/\_\_\_\_/\_\_\_\_ Birth Place (city/state or country) \_\_\_\_\_

Med. School \_\_\_\_\_ Location \_\_\_\_\_ Grad. Year \_\_\_\_\_

Residency Hospital \_\_\_\_\_ Location \_\_\_\_\_

Hawaii License Number \_\_\_\_\_ Year Licensed \_\_\_\_\_ Other State Licenses \_\_\_\_\_

Specialty (Primary) \_\_\_\_\_ Specialty (Secondary) \_\_\_\_\_

### CONDITIONS OF MEMBERSHIP AND APPLICATION

Compliance with the Principles of Medical Ethics as interpreted in the Code of Medical Ethics, the Bylaws of the American Medical Association, and the Rules of the AMA Council on Ethical and Judicial Affairs are conditions of applying for AMA / HMA membership.

- The Principles are a declaration of ethical guidelines, created by the AMA for physicians and are accessible online at: [www.ama-assn.org/ama/pub/category/2512.html](http://www.ama-assn.org/ama/pub/category/2512.html)
- The Code of Medical Ethics may be viewed online at: [www.ama-assn.org/ama/pub/category/2498.html](http://www.ama-assn.org/ama/pub/category/2498.html)
- The AMA's Bylaws are accessible at: [www.ama-assn.org/ama/pub/category/13374.html](http://www.ama-assn.org/ama/pub/category/13374.html)
- The Rules of the Council on Ethical and Judicial Affairs are available at: [www.ama-assn.org/ama/pub/category/13375.html](http://www.ama-assn.org/ama/pub/category/13375.html)

Unless otherwise disclosed to the AMA Office of General Counsel, by submitting your application you confirm you have not:

- i. been convicted of a fraud or a felony within the last five years;
- ii. had any action taken against you in any jurisdiction within the last five years (or extending to within the last five years) regarding your license to practice medicine (including actions involving revocation, suspension, limitation, probation or any other sanctions or conditions imposed upon your license); or
- iii. been the subject of any disciplinary action by any medical society, hospital staff, federal or

state government within the last five years.  
Membership is contingent upon HMA / AMA acceptance of the membership application. The endorsement, deposit, or negotiation of an applicant's check does not guarantee admission into or acceptance of membership by the HMA / AMA. Checks received will routinely be deposited without a determination of the propriety of the payment or the applicability of the amount. Applicants who are not admitted to membership will receive a refund for the amount submitted.

I am aware that the information submitted in this application will be verified. I hereby authorize other organizations having information relating to this application, including governmental and regulatory entities, to release any and all such information.

I also agree to notify the Hawaii Medical Association and the County Medical Society of any disciplinary actions, adverse decisions, or restrictions placed upon my medical license.

The foregoing information is true and complete and I endorse the AMA Principles of Medical Ethics.

Signature \_\_\_\_\_ Date \_\_\_\_\_

The Health Care Quality Improvement Act requires professional societies to report certain professional review actions, including denial of membership, to the National Practitioner Data Bank. Illinois law governs any legal matter relating to membership decisions by the AMA.

### AMA MEMBERSHIP CATEGORIES AND DUES RATES

#### AMA DUES

##### Resident/Fellow Membership

- Single-year membership \$ 45
- Three-year membership \$ 120
- Four-year membership \$160

#### Student Membership

- Single-year membership \$ 20
- Two-year membership \$ 38
- Three-year membership \$ 54
- Four-year membership \$ 68

• AMA dues are not deductible as a charitable contribution for federal income tax purposes, but may be partially deducted as a business expense. AMA estimates that 65% of your 2018 membership dues are allocable to lobbying activities of the AMA, and therefore are not deductible for income tax purposes.

• Dues paying members are eligible for print copies of JAMA and American Medical News. The allocated cost of \$34 for JAMA and \$14 for American Medical News is included in and not deductible from AMA membership dues. All members receive free online access to JAMA, American Medical News and the Archives.

### PAYMENT INFORMATION

The following dues are enclosed with this application:

HMA / County \$ \_\_\_\_\_ 0.00 \_\_\_\_\_

HAMPAC \$20 for students/residents \$ \_\_\_\_\_

AMA \$ \_\_\_\_\_

Total Amount \$ \_\_\_\_\_

Check payable to HMA  Visa  MasterCard  AMEX

Cardholder Name \_\_\_\_\_

Card Number \_\_\_\_\_

Exp. date \_\_\_\_\_ Statement Address  Office  Home

Other Address \_\_\_\_\_

Signature \_\_\_\_\_

Please return application with payment in the enclosed self-addressed envelope, or fax to (808) 528-2376; toll-free (866) 528-2376.