



Tri-State Dental Hygienists' Society

366 E. Gorgas Lane Philadelphia PA 19119
215-844-3228 215-844-8011-fax www.tsdhsonline.org

MEMBERSHIP APPLICATION

Our main goal is to provide scholarship opportunities for African-American Dental Hygiene Students in the Philadelphia, New Jersey and Delaware region and to encourage and promote networking opportunities for our members.

Name (Last, First Middle Initial)

Birth Date - Month/Day

Street Address

Apt No.

City/State/ZipCode

Email Address

() _____
Daytime Phone

() _____
Evening Phone

() _____
Cell Phone

EDUCATION:

Dental Hygiene School Attended:

Year of Graduation:

Degree:

Additional Education:

LICENSURE:

Dental Hygiene License #:

State:

Date Issued:

ANNUAL MEMBERSHIP DUES: (Membership dues contribute to scholarships for dental hygiene students)

\$35.00 - Licensed Dental Hygienist

\$10.00 - Undergraduate Dental Hygiene Student

Signature

Date

Please complete application and return with check or money order payable to:

Tri-State Dental Hygienists' Society

c/o Blythe Brown, Treasurer

540 Mason Drive

New Castle, DE 19720

We are a component of the National Dental Hygienists' Association and therefore encourage all of our members to support the NDHA by becoming an active member. For more information visit www.ndhaonline.org.