



**HOI Y SI VIET NAM HOA KY  
VIETNAMESE AMERICAN MEDICAL ASSOCIATION**

www.vamaUSA.com

4108 Surfside Ct., Arlington, Texas , USA

Tel: (682) 667-1016; Fax: (817) 468-1852;

E-Mail: [vama2011@gmail.com](mailto:vama2011@gmail.com)

**Membership Application**

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Last, Middle, and First Name:

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Degree / Specialty:

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Address:

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Phone:

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E-Mail:

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Current Status (select one):      Physician      Resident/Fellow      Student      Retiree

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**I. Fees ( check payable to VAMA)**

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**Total**

|   |  |
|---|--|
| Practicing Members<br>( please chose one) | \$100 one year<br>\$200 two year<br>\$300 three year |
| (Residents / Fellows)                     | \$ 25 one year                                       |
| (Lifetime Membership)                     | \$1,000  |
| Student & Retirees                        | Free   |

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**II. Donation(check payable VAMA Foundation)**

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( Tax-deductible portion )

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(Natural Disaster Relief Fund) :

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(Educational / Scholarship Fund):

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**(Grand Total I+II):**

\$

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Please Mail check & form to

**Vietnamese American Medical Association  
4108 Surfside Ct  
Arlington, Texas 76016**