



A charitable corporation  
founded by the  
Medical Society of  
Delaware

**Membership Dues  
And  
Endowment Fund  
Contribution**

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

*Please return this completed form with contribution. Thank You!*

DMEF is organized under 501(c)(3) of the Internal Revenue Code.  
All contributions to DMEF are fully tax deductible. A receipt will be mailed to you.

Minimum

Dues Amount: \$ 5 0. 00

Endowment Fund: \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

ENDOWMENT FUND (categories of giving beyond dues)	
The Society:	\$1000 or more
The League:	\$500 - 999
The Academy:	\$250 - 499
Fellow:	\$101 - 249
Friend:	\$100 or less annually

**PAYMENT INFORMATION**

**CHECKS:** Please make checks payable to DMEF—900 Prides Crossing, Newark, DE 19713.

**Credit Card Payments:**

\_\_\_\_\_ Master Card \_\_\_\_\_ Visa

If information is different from above, please complete:

Name on Card \_\_\_\_\_

Billing Address for Credit Card \_\_\_\_\_

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

Expiration Date \_\_\_\_\_

CVC/CVS # (on back of card) \_\_\_\_\_

**Please return membership form and payment to:**

**Mary LaJudice  
c/o DMEF Membership  
900 Prides Crossing  
Newark, DE 19713**

**Questions? Contact Lynn Robinson at (302) 224-5198**