



# Application for Subscriber/Supporter Status

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of birth \_\_\_\_\_ MALE / FEMALE

Did someone recommend MDA membership to you? If so, whom? \_\_\_\_\_

Phone:

- Home \_\_\_\_\_
- Work \_\_\_\_\_
- Cell \_\_\_\_\_

E-mail \_\_\_\_\_

Profession: \_\_\_\_\_

Do you currently hold a professional license? If so, what profession? \_\_\_\_\_

Professional Licence # \_\_\_\_\_

Are you a member of any professional associations? If so, please list: \_\_\_\_\_

Employment Status:

- Full-time
- Part-time
- Student
- Retired
- Not applicable

Have you been a member of ADA or MDA in the past? \_\_\_\_\_

Why are you requesting an MDA membership? \_\_\_\_\_

Membership Category Requested:

- Supporter \$50
- Subscriber \$150

**ADA'S MEMBERSHIP YEAR IS JUNE 1—MAY 31, REGARDLESS OF MEMBERSHIP ACCEPTANCE DATE.**

MDA dues are not prorated, refundable or transferable.

Maryland Dietetic Association (MDA) dues must be paid in full based upon your membership category and are non-refundable and non-transferable. MDA dues are not deductible as charitable contributions, but dues may be deductible as ordinary business expenses.

*If accepted as a member, I agree to abide by the Code of Ethics for the Profession of Dietetics, the MDA Bylaws and regulations, and to hold harmless the Association, its members and employees for their activities in enforcing them. I also consent to receive any faxes or e-mails that MDA and its related organizations (affiliates, DPGs and MIGs) may elect to send. (Sign below)*

**Signature** \_\_\_\_\_

**Date (month/day/year)** \_\_\_\_\_

*Please note that your Maryland Dietetic Association (MDA) membership status is separate and distinct from your current/former status as an RD or DTR with the Commission on Dietetic Registration (CDR). If you are/were credentialed as an RD or DTR by CDR and would like to address issues relating to your current/former credential, contact CDR at 800-877-1600, Ext. 5500.*

**Please make checks payable to MDA. To pay by credit card, please call the MDA office 410/591.9865  
Mail completed application to MDA, PO Box 642, Buckeystown, MD 21717**