

**Marion County Dental Association
Application Information and Form**

Provisional Membership is granted to applicants following successful review of qualifications including ADA/FDA/CDDA membership and payment of one half (1/2) of prorated annual dues.

The Executive Council will review your FDA Application and, unless there is membership objection, a candidate will be automatically admitted into provisional membership for one year.

During this year, the provisional member must attend two bimonthly meetings and participate in Children's Dental Health Month activities. At the end of the year, written application will be made for Active Membership and election will be by written ballot of the membership.

I _____ apply for Provisional Membership in the Marion County Dental Association. My ADA Membership # is _____ or my application has been forward to CDDA _____.

Prorated dues of \$_____ is attached

Signature