



North Carolina Society of Eye Physicians & Surgeons

PO Box 27167 | Raleigh, NC 27611 | Fax: 919-833-2023
Tel: 919-833-3836 | ncoph@ncmedsoc.org | www.nceyemd.org

2014 Membership Renewal Form

The NC Society of Eye Physicians and Surgeons is the voice of our specialty in North Carolina. Through education, advocacy, communications and professional relations, the NC Eye Society represents our specialty and promotes excellence in ophthalmic patient care. Your membership is critical to our success. Thank you for your commitment to our specialty and the eye health of the citizens of North Carolina.

2014 Membership Dues:

- | | |
|--|-------|
| <input type="checkbox"/> Active Physician..... | \$500 |
| <input type="checkbox"/> 3 rd Year of Practice.... | \$400 |
| <input type="checkbox"/> 2 nd Year of Practice.... | \$300 |
| <input type="checkbox"/> 1 st Year of Practice..... | \$200 |

Payment Options:

- Renew online at www.nceyemd.org
- Contact Evan Simmons at **919-833-3836** to renew by phone
- Complete and return this form by mail or fax to:
NCSEPS
PO Box 27167
Raleigh, NC 27611-7167
Fax: 919-833-2023

My payment information:

☐ Personal Check ☐ MasterCard ☐ Visa

Card number: _____ Exp. Date: _____ CVV: _____

My contact information:

Name: _____

Email: _____

Practice Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Telephone: _____ Fax: _____

Thank you for your support of the NC Society of Eye Physicians and Surgeons!