



National Association of EMS Physicians
 P.O. Box 15945-281 • Lenexa, KS 66285-5945
 (913) 895-4611 or (800) 228-3677 • Fax: (913) 895-4652

MEMBERSHIP APPLICATION

Full Name: _____
 (Include academic accomplishments such as MD, DO, MPH, PhD, EMT-P, EMT, RN etc.) Limit 3

Please check below accordingly. Preferred Mail: All membership mailings and renewal notices will be sent to this address.

HOME ADDRESS – Preferred Mail

Mailing Address: _____

City: _____ State/Province: _____

Zip: _____ Country: _____

Phone: _____ Fax: _____ E-mail: _____

BUSINESS ADDRESS – Preferred Mail

Company/Institution (if applicable): _____

Mailing Address: _____

City: _____ State/Province: _____

Zip: _____ Country: _____

Phone: _____ Fax: _____ E-mail: _____

Are you a Medical Director? YES NO

Primary EMS Affiliation Role or Title: _____

In what environment is your primary EMS affiliation located?

Urban Suburban Rural Frontier Other: _____

Medical specialty (physicians): _____

Non-physician primary medical specialty:

- | | | |
|--|---|--|
| <input type="checkbox"/> Paramedic | <input type="checkbox"/> EMT-Basic | <input type="checkbox"/> EMT-Intermediate |
| <input type="checkbox"/> EMT-Paramedic | <input type="checkbox"/> EMD | <input type="checkbox"/> First Responder |
| <input type="checkbox"/> Nurse | <input type="checkbox"/> Research | <input type="checkbox"/> Education |
| <input type="checkbox"/> Medical Student | <input type="checkbox"/> Administrative | <input type="checkbox"/> Physician Assistant |
| <input type="checkbox"/> Other: _____ | | |

Employer Type:

- | | | |
|---|-------------------------------------|---|
| <input type="checkbox"/> Fire Department | <input type="checkbox"/> Volunteer | <input type="checkbox"/> Hospital-based |
| <input type="checkbox"/> 3rd Service Government | <input type="checkbox"/> Industrial | <input type="checkbox"/> Commercial/Private |
| <input type="checkbox"/> Academic | <input type="checkbox"/> Military | |
| <input type="checkbox"/> Other: _____ | | |

How did you hear about us? _____

(continued on back)

