

Monmouth-Ocean Medical Society

PO Box 549, Howell, NJ 07731
(732) 905-5152 Fax (732) 323-0028
ocmsmcmsmedsocs@aol.com

APPLICATION INSTRUCTIONS FOR MEMBERSHIP IN THE
MONMOUTH-OCEAN MEDICAL SOCIETY AND THE
MEDICAL SOCIETY OF NEW JERSEY

The application is for county and state membership, (membership is unified).

All applications must be typed or legible. All blanks should be filled in, with the exception of your medical education number. We will provide this information if you do not.

The application should be returned to this office with your dues check. (State society policy requires us to request dues at the time of application.)

Please refer to our 2015 Dues Chart to determine your dues category. If you are paying by credit card, please be sure to fill out the "Payment Method" portion of the application.

Usually, there is about a 2 – 3 week period from the time we receive your application to the time of election. Questions on the application are verified with the AMA and the State Society during this period.

If you have any questions or need assistance, please call the county society and we will assist you with the application.

Thank you for your support.