



Global Alliance for Medical Education
Membership Application
Sign up online at <http://www.game-cme.org/join>

3416 Primm Lane
Birmingham, AL 35216

Membership is valid from January 1 to December 31 each year. The space below is provided for your contact information:

First Name: _____ Last Name: _____
Position/Title: _____ Degree(s)/ Prof. Certifications: _____
Employer/Institution/Affiliation: _____
Address (mailing)
Address: _____
City: _____ State: _____ Zip: _____ Country: _____
Home Phone: _____ Work Phone: _____ Cell/Mobile Phone: _____
Email: _____
Web page address: _____ Are you a CME/CPD Service Provider (Y or N): _____

GAME Membership Dues (select 1 of the following)

- Annual Membership \$200 (USD)
- Institution up to 5 members \$750 (USD)
- Institution up to 10 members \$1,300 (USD)
- Institution up to 20 members \$1,500 (USD)
- Student - FREE
Full time student membership is available at no cost. Student agrees to submit/contribute (research/abstracts/papers) to the GAME activities.

Total \$ _____

Method of Payment

_____ Check (U. S. Dollars only) _____ Credit card: (Visa, MasterCard, Disc, Amex)

If paying by credit card complete the following information and return to the Game Business Office

Card Number: _____

Expiration Date: _____ CID/Security Code: _____

Print name as it appears on Card: _____

Please make your payment to "GAME" in US Dollar currency and return with this form to:
GAME * 3416 Primm Lane * Birmingham, Alabama 35216, USA

Institutional Contact Information

Please list the **name, address and email** for each sub-account to your institutional membership. These individuals will have the option to add their mailing address once their online profile is activated.

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____

Name: _____

Email: _____