



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

info@game-cme.org

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 info@game-cme.org

Card Number:

Expiration Date: CID/Security Code:

Print name as it appears on Card:

Billing Address (must match that of credit card)
Address:

City: State: Zip: Country:

Home Phone:

Please make your payment to "GAME" in US Dollar currency and return with this form to: info@game-cme.org

For mailing address for a check, email info@game-cme.org

Institutional Contact Information

Please list the name 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: _____