

**CHARLES H. TWEED INTERNATIONAL FOUNDATION FOR ORTHODONTIC RESEARCH
APPLICATION FOR MEMBERSHIP**

To apply for membership in the Charles H. Tweed International Foundation, you must have successfully completed the Tweed Study Course and be a current member in your country's recognized orthodontic association. The annual dues payment is \$100 for Regular/Fellow members. Tweed Study Course Instructing Staff pay \$100 for the *first* year and \$250 annual dues thereafter.

Please submit:

1. **APPLICATION FOR MEMBERSHIP**
2. **Copy of membership to your country's orthodontic association**
3. **NEW MEMBER DUES STATEMENT**; Dues may be paid by check in U.S. funds or by VISA or MasterCard credit card. To pay by credit card you may download a NEW MEMBER DUES STATEMENT at www.tweedortho.com or request a form by emailing chtweed@aol.com.

Mail or fax to: Charles H. Tweed International Foundation
2620 E. Broadway Blvd.
Tucson, AZ 85716,
USA
Fax: 520-326-1163

PLEASE TYPE or PRINT CLEARLY

NAME _____
(Last Name) (First Name) (Middle)

EMAIL ADDRESS _____
(Please enter one character per space)

BUSINESS
Street Address _____

City _____ State _____ Country _____

Postal Zip Code _____ Business PH _____ Business FAX _____

HOME
Street Address _____

City _____ State _____ Country _____

Postal Zip Code _____ Home PH _____ Home FAX _____

SUCCESSFUL TWEED COURSE COMPLETION _____
(Month) (Year)

ORTHODONTIC EDUCATION INFORMATION
University attended _____
Year started in orthodontic practice: _____ (Graduation Date)

PROFESSIONAL ORGANIZATION INFORMATION
List the specialty organizations of which you are a member:

Please feel free to contact our office in Tucson at PH (520) 326-6002, FAX (520)326-1163, or at chtweed@aol.com if you have any questions or need assistance.