



# 2023 ALUMNI ASSOCIATION DUES RENEWAL STATEMENT

UNIVERSITY OF ALABAMA SCHOOL OF DENTISTRY  
 ALUMNI ASSOCIATION  
 SDB 217 | 1720 2ND AVENUE SOUTH  
 BIRMINGHAM, ALABAMA 35294-0007  
 205.934.3575 | 205.934.9740 FAX  
 UAB.EDU/DENTISTRY

A strong, active Alumni Association is one of the greatest assurances that our school will continue to be at the forefront of dental education. Your continued support is greatly appreciated.

**RENEW DUES ONLINE - [uab.edu/dentistry/home/alumni](http://uab.edu/dentistry/home/alumni)**

**PERSONAL INFORMATION**

FIRST NAME		LAST NAME		MIDDLE NAME OR INITIAL	
UAB DMD GRAD YEAR	UAB RESIDENCY & GRAD YEAR		INDICATE IF YOU PREFER TO HAVE MAIL SENT TO		
				<input type="checkbox"/> HOME <input type="checkbox"/> OFFICE	
HOME ADDRESS				HOME PHONE	
CITY			STATE	ZIP	
OFFICE ADDRESS				OFFICE PHONE	
CITY			STATE	ZIP	
EMAIL ADDRESS				CELL PHONE	

**ENCLOSE SEPARATE CHECKS FOR PAYMENT - For each section noted below if you do not pay online.**

**ALUMNI ASSOCIATION DUES (CHOOSE 1 CATEGORY) & DONATIONS**

2023 ANNUAL MEMBERSHIP DUES	<input type="checkbox"/> \$100.00
2023 YOUNG ALUMNI MEMBERSHIP DUES Applicable only for UAB DMD or Residency Graduates of 2018, 2019, 2020, or 2021 *2022 UAB DMD or Residency graduates complimentary	<input type="checkbox"/> \$50.00
2023 RETIRED DENTIST MEMBERSHIP DUES Applicable only for alumni 70 years or older who no longer hold a license	<input type="checkbox"/> \$50.00
DONATION TO ALABAMA DENTAL ALUMNI ASSOCIATION - DEAN'S FUND	<input type="checkbox"/> \$ _____
DONATION TO ALABAMA DENTAL ALUMNI ASSOCIATION - JOY B. WHITE FUND	<input type="checkbox"/> \$ _____
<b>PLEASE MAKE CHECKS PAYABLE TO: ALABAMA DENTAL ALUMNI ASSOCIATION TOTAL</b>	<input type="checkbox"/> \$ _____

**UAB DENTISTRY DONATIONS**

DONATION TO UAB DENTISTRY – ALUMNI ASSOCIATION ENDOWED PROFESSORSHIP II	<input type="checkbox"/> \$ _____
DONATION TO UAB DENTISTRY – EXCELLENCE IN ALABAMA DENTISTRY FUND	<input type="checkbox"/> \$ _____
DONATION TO UAB DENTISTRY – DR. MILTON E. ESSIG SCHOLARSHIP IN DENTISTRY FUND	<input type="checkbox"/> \$ _____
DONATION TO UAB DENTISTRY – SCOTT AND SUSAN HUFFMAN ENDOWED SCHOLARSHIP FUND	<input type="checkbox"/> \$ _____
DONATION TO UAB DENTISTRY – DR. WILSON WRIGHT ENDOWMENT FUND	<input type="checkbox"/> \$ _____
<b>PLEASE MAKE CHECKS PAYABLE TO: UAB DENTISTRY TOTAL</b>	<input type="checkbox"/> \$ _____