Medical Group Management Association
Central Savannah River Area, Ga.

Annual Membership Dues Statement

July 1, 2026 – June 30, 2027

Regular Membership: $150

_____New _____Renewal

Requirement: Members in this category must be in an active management role within the field of healthcare practice management.

Affiliate Membership: $275

_____New _____Renewal

Requirement: Members in this category must provide products and/or services directly to healthcare delivery organizations; to include consultants, accountants, suppliers, vendors, financial or legal representatives, etc.

Dues are paid by: ☐ personal ☐ organization ☐ personal/organization reimbursement

Please make checks payable to:

CSRA Medical Group Managers' Association

PO Box 1596 Evans GA 30809

Your payment is due by August 15, 2026

Please update your personal information for us:

Name: _____Position: _____

Employer: _____Email: _____

Website: _____

Address: _____

Phone: _____Fax: _____

Please list any subject you would like discussed or speakers you would like to hear:

Subject: _____Speaker: _____

____ I would be interested in serving on the Board this year.