



2024 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

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

| | |
|--|---|
| 2024 ANNUAL MEMBERSHIP DUES | <input type="checkbox"/> \$100.00 OR _____ |
| 2024 YOUNG ALUMNI MEMBERSHIP DUES <small>Applicable only for UAB DMD or Residency Graduates of 2019, 2020, 2021, 2022 *2023 UAB DMD or Residency graduates complimentary</small> | <input type="checkbox"/> \$50.00 OR _____ |
| 2024 RETIRED DENTIST MEMBERSHIP DUES <small>Applicable only for alumni 70 years or older who no longer hold a license</small> | <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"/> \$ _____ |
| PLEASE MAKE CHECKS PAYABLE TO: ALABAMA DENTAL ALUMNI ASSOCIATION TOTAL | <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"/> \$ _____ |
| DONATION TO UAB DENTISTRY – DR. PERNG-RU LIU ENDOWED SCHOLARSHIP FUND | <input type="checkbox"/> \$ _____ |
| PLEASE MAKE CHECKS PAYABLE TO: UAB DENTISTRY TOTAL | <input type="checkbox"/> \$ _____ |