

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



California Chapter 1

RESIDENT MEMBER APPLICATION 2011

Name: _____

Date: _____

Street: _____

Phone: _____

City: _____

Zip Code: _____

Email: _____

Medical School: _____

Internship Location: _____

Year of Residency: (Please circle one) 1st 2nd 3rd Chief Resident

Residents are provided free membership in California Chapter 1 and may participate on committees including: Advocacy, Behavioral/Developmental Pediatrics/International Child Health/Medical Education/School Health/Substance Abuse Prevention/Young Physicians/Youth.

Please return this application to:

CC1, AAP
68 Mitchell Blvd., #252
San Rafael, CA 94903
Fax: 415/479-9202
Email: aapbev@sbcglobal.net

For questions, please contact Executive Director, Beverly Busher at:
415/479-9200