



# South Bay Pathology Society

## 2020 Annual Registration for Institutional Memberships (web stream only)

To pay by credit card, visit <https://southbaypath.org/membership>.

If you prefer to write a check, please:

- 1) Fill in your institution's information below, and indicate which membership plan you're purchasing. You may purchase more than one.
- 2) On the second page, please list the names and email addresses of all of your affiliates who plan use this membership to earn CME credits. Please do add additional sheets if necessary.
- 3) Mail this form and your check, payable to **SOUTH BAY PATHOLOGY SOCIETY**, to the address below.

### Institution Information

Institution Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Name \_\_\_\_\_

Contact Phone \_\_\_\_\_

Contact Email \_\_\_\_\_

Please provide a receipt

### Membership Options

\_\_\_\_\_ Institutional Membership (2 CME credits per meeting, web stream only) .....\$ 600.00

\_\_\_\_\_ Institutional Membership (8 CME credits per meeting, web stream only) .....\$ 1,500.00

We appreciate your affiliation with the South Bay Pathology Society.

**Liz Treynor, MD**  
 Secretary/Treasurer  
 etreynor@gmail.com  
 195 Gloria Circle  
 Menlo Park, CA 94025



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### Affiliates Who Plan to Earn CME Credits

Institution Name \_\_\_\_\_

1. Name \_\_\_\_\_

Email Address \_\_\_\_\_

2. Name \_\_\_\_\_

Email Address \_\_\_\_\_

3. Name \_\_\_\_\_

Email Address \_\_\_\_\_

4. Name \_\_\_\_\_

Email Address \_\_\_\_\_

5. Name \_\_\_\_\_

Email Address \_\_\_\_\_

6. Name \_\_\_\_\_

Email Address \_\_\_\_\_

7. Name \_\_\_\_\_

Email Address \_\_\_\_\_

8. Name \_\_\_\_\_

Email Address \_\_\_\_\_