

WESTMORELAND COUNTY MEDICAL SOCIETY
ORGANIZED NOVEMBER 15, 1859

Please fill in answers to the following questionnaire and return to this office:
Westmoreland County Medical Society, 378 Lovejoy Road, Commodore, PA 15729 or scan and email to
office@wcmspa.org. Thank you.

PLEASE PRINT:

Name _____
Last First Middle

Home address/telephone number _____

Office address/telephone number _____

Fax # _____ Email address _____

Preferred address for receiving mail _____

Office Manager _____

Group Practice yes _____ no _____ Name of Practice _____

Name of Practice Associates _____

Born at _____ Day _____ Month _____ Year _____

Marital status _____ Spouse's name and occupation _____

Graduated from _____ Medical College Year _____

Licensed or certified in Pennsylvania (Date) _____

Licensed in what other state(s) _____

Affiliated with which hospital(s). (If you are Chief of Service, etc., please state particulars) _____

Previous County Society to which you have belonged and offices you have held with dates _____

Specialty _____ Board Certified? _____ or Board Eligible? _____

Please enclose a copy of your Pennsylvania Medical License and recent photograph.

Signature

Date