



Tennessee Society of Allergy, Asthma and Immunology

6701 Baum Drive, Suite 140, Knoxville, TN 37919

Phone: 865-584-5727 / Fax: 865-450-9904

NEW MEMBERSHIP APPLICATION

(Please Print - information for TSAAI use and will not be released)

NAME MD DO NP PA

GROUP PRACTICE NAME

OFFICE ADDRESS SUITE #

CITY STATE ZIP CODE

TELEPHONE E-MAIL

HOME ADDRESS

CITY STATE ZIP CODE

MEMBERSHIPS: ACAAI AAAAI OTHER

UNDERGRADUATE DEGREE

SCHOOL _____ YEAR _____

MEDICAL DEGREE

SCHOOL _____ YEAR _____

RESIDENCIES _____ YEAR _____

BOARD CERTIFICATION

BOARD _____ DATE _____

BOARD _____ DATE _____

Please send completed application, **short curriculum vitae**, and application fee of \$100.00* to:

TSAAI, Attn: Michelle Kittle, 6701 Baum Drive, Suite 140, Knoxville, TN 37919

**If you prefer to pay online, please email you application and CV to receive a link for online payment processing.*

Contact Michelle at tsaai@tsaai.org