

The New Jersey Academy of Ophthalmology

414 River View Plaza
 Trenton, NJ 08611
 Phone: 609-392-1201

**** Membership Application ****

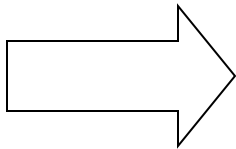
BILL TO	Corrections to Address

Please verify/correct/complete the following information:

Practice Name:	County:
Email Address:	Website:
Phone:	Fax:

DESCRIPTION	AMOUNT
2024 NJAO Membership Application	<i>Please circle one</i>
Senior Active* A Senior Active Member is a <u>physician</u> who has been an Active Member for at least 20 years but now has a limited practice. <ul style="list-style-type: none"> o First Year in Practice Member may deduct \$100.00 from their membership dues. o Residents and Fellows pay no dues while they participate in an accredited residency or fellowship program. <hr/> As in the past, contributions or gifts to the New Jersey Academy of Ophthalmology (NJAo) are not tax deductible as charitable contributions for income tax purposes. They may be tax deductible as ordinary and necessary business expenses, however, as a result of the federal budget and tax laws passed in 1993, any portion of dues used for lobbying activities are no longer tax deductible for federal purposes. Based on the portion of dues allocated for lobbying, NJAO estimates that the non-deductible portion of your 2024 dues to NJAO is 50 percent.	\$600.00

**PLEASE
NOTE
NEW
MAILING
ADDRESS**



Please return this invoice with your payment.
 Make checks payable to: **NJAO** and mail to
 414 River View Plaza, Trenton, NJ 08611
 or **(circle one)**
 Visa® MasterCard® AmEx®

Account #: _____ - _____ - _____

Expiration Date: _____ Signature _____

Security Code: _____

and fax to: 609-393-9891

**** NJAO Website Link Authorization**

**** website or email we can link to your practice site**

All active members will be included on the NJAO website unless indicated below

No, I DO NOT want my name/office listed on the NJAO website.