



AHNS CERTIFICATE ORDER FORM

The American Head & Neck Society will issue a wall certificate to Active, Associate and Corresponding members upon request. The certificate includes a wall plaque. Price: \$50.00 USD. There is no shipping or handling fee.

ORDER INFORMATION

Please type or print information

MEMBER NAME _____

MAIL TO: ADDRESS _____

CITY/STATE/ZIP CODE _____

COUNTRY _____

PHONE _____ FAX _____

EMAIL _____

CERTIFICATE INFORMATION

Indicate EXACTLY how you would like your name printed on the certificate:

(Example: Joseph A. Smith M.D., F.A.C.S.)

PAYMENT INFORMATION

- US cheque/check/money order payable to AHNS for \$50.00 USD.
 Credit Card Charge MasterCard VISA American Express

Card Number: _____ Expiration Date: _____

Cardholder Name: _____ Signature: _____