



International Association of Coroners & Medical Examiners

Professionalism & Prevention

Dedicated to the promotion of excellence in medicolegal death investigation through annual educational seminars for over 70 years

MEDICOLEGAL PROFESSIONAL STATE MEMBERSHIP APPLICATION

Date: _____

State Association Name: _____

Mailing Address: _____

City: _____ State: _____ Zip+4 _____

Phone: _____ Fax: _____

Free member: _____

E-mail: _____

Website: _____

ORGANIZATIONAL INFORMATION CHECKLIST (please attach to application, if information has changed or new application):

- Electronic copy of current membership list, including email addresses
- Board roster

State Association Dues

**State Association membership free through December 2017, \$250 per year thereafter.
With every paid State Association Membership, obtain one (1) free individual membership.
Association membership applies only to the
state association organization and not its individual members.**

Date

Signature

If your state is interested in joining, please fill out the following application and mail it to the IAC&ME President Elect/Secretary:

John Fudenberg, IAC&ME
1704 Pinto Lane
Las Vegas, NV 89016
702-455-3385 FUD@clarkcountynv.gov