



Dues Renewal for June 1, 2022—May 31, 2023

Name: _____ Missouri License # _____

Address: _____ OE Tracker # _____

_____ Email _____

_____ State Rep/District _____

Phone: _____ State Senator/District _____

Cell: _____ Referred By (if new) _____

SLOS Member

SLOS MEMBERSHIP DUES

_____ Full Member	I am a member of the State MOA Assn. & the AOA	\$75.00
_____	Paying by credit card, pay \$78.75	
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_____ University Class	Full time educator at a College of Optometry and a member of the State Assn. & the AOA	\$50.00
_____	Paying by credit card, pay \$52.75.	
_____ Retired Member	I am practicing less than 4 hours per week.	\$25.00
_____	Paying by credit card, pay \$27.00	
_____ New Graduate	Graduated May, 2022 from College of Optometry	\$ 25.00
_____	Paying by credit card, pay \$27.00	
_____ Associate Member	All other optometrists not members of MOA/AOA	\$175.00
_____	Paying by credit card, pay \$181.00	

NOTE: 15% of all annual dues is not deductible as that percentage can be allocated to legislative and/or lobbying efforts in the State of Missouri

I am associated with: _____

Other professional memberships: AOA MOA IOA AAO HOACLS Other _____

In addition to full scope vision care I or my office provides: ___ Home vision care ___ Nursing home calls Other _____

I would volunteer for _____ Screenings _____ Health Fairs _____ Public speaking

Paying by credit card: Card # _____ Expiration _____ CVC _____

Name on card: _____ Billing Zip Code _____

Mail completed form with payment to: SLOS, P. O. Box 6136, Chesterfield, MO 63006