

THE OBSTETRICAL SOCIETY OF PHILADELPHIA



OUR MISSION: *"To embrace our legacy, foster collegiality, and share expertise
to improve the health of women in Philadelphia and beyond."*

2026-2027 PROGRAM DUES INVOICE

Dues for 2026-2027 academic year are based on the number of residents in each program. \$100.00 per resident.

Number of residents in your program _____ x 100.00 per resident \$ _____ enclosed

Please complete and return this form with your payment.

(PLEASE PRINT)

Program Name _____

Program Director _____

Director's email address _____

Program Coordinator _____

Coordinator's email address _____

Mailing Address _____

City, State, Zip _____

Phone _____ Fax _____ Email _____

N.B. Please remember that your Society, in addition to being a 501(c) (3) tax exempt entity, is also licensed by the Commonwealth of Pennsylvania to be a Charitable Organization. These distinctions enable you to deduct any money paid to the Society as a tax deduction on your IRS return.

Please return this statement with your payment to:

Teri Wiseley, CMM
Obstetrical Society of Philadelphia
308 Rolling Creek Road
Swarthmore, PA 19081

308 Rolling Creek Road, Swarthmore, Pennsylvania 19081
Telephone 484-716-8909
www.obsociety.org