



American Dental Assistants Association

TO: Directors and Instructors, Dental Assisting Programs
FROM: Doug McDonough & Isabel Guillen, ADAA Staff
RE: Student Memberships
DATE: December 2009

Here's an opportunity to involve your students with the American Dental Assistants Association at a very reasonable price. Please make our membership applications available to your classroom at the start of this new term.

- One of the best things about ADAA student membership, at only \$30, is the opportunity for students to purchase professional liability insurance at only \$10 additional. Our enclosed application forms outline the many ADAA benefits and we urge you to review them and present them to your class... call us if you have questions or require further details.
- Juliette Southard/Oral-B Scholarship applications are due March 31 each year and are awarded by June each year. Request from Central Office by e-mail or fax, or download from our website www.dentalassistant.org.
- Student Achievement Award applications which earn recognition for an individual dental assisting student nationally may also be requested and must be submitted by March 31.
- Instructors are encouraged to obtain a Dental Assistants Recognition Week activity kit from our website www.dentalassistant.org. Kits will be available for download online in January 2010. (No phone calls please.)
- Under a special "starter" plan, students converting to active membership pay reduced dues for their first three years of Active status.

On the reverse side of this letter, you will find the information necessary for processing first year student membership as well as for renewing student memberships.

We want to thank you sincerely for your cooperation in helping your students to become part of the ADAA... the people who make dental assisting a profession.

PLEASE NOTE: Membership is valid through December 31, 2010.

We have had a lot of problems and resulting expense with student checks being returned for insufficient funds. Please do not forward student checks unless they have been certified. Thanks!

STUDENT MEMBERSHIP ELIGIBILITY

Students holding full or part time student status in a course lasting at least three months may apply for ADAA Student Membership.

Dues are \$30. Please ask students to submit either a certified check or money order. The instructor's personal check will also be accepted. After a student's membership has been processed, no refunds will be issued. All applications must be signed by the instructor and returned to ADAA, 35 East Wacker Drive, Suite 1730, Chicago, Illinois 60601-2211. Please allow 4–6 weeks for processing and receipt of membership card and pin.

If publications are not received on a regular basis, there may be some problem with the mailing address. To correct any problems, please telephone 312-541-1550 from 9 AM, weekdays.

The special student rate may not be combined with any other discount.

SECOND YEAR STUDENTS and those who have completed their education

Note: Second year students who are currently members of the ADAA will receive a dues notice approximately 6 weeks prior to their membership expiration. The renewal form will be for graduated ACTIVE Membership at \$45 less than usual national dues PLUS state association dues and \$10 for liability insurance . . . mandatory with Active Membership.

If the member is a continuing second year student, he/she may continue student status (rather than converting to new Active Member Status). A continuing student may renew for one year at \$30 without mandatory insurance when re-applying for student membership and simply by filling out the back of the renewal bill and obtaining the instructor's signature.

If a student is not billed upon membership expiration, please call or e-mail and we will supply you with appropriate renewal forms. Continuing students must add \$10 to obtain or continue insurance.

PROFESSIONAL LIABILITY INSURANCE

Student members are not automatically covered by liability insurance (\$1 million aggregate) but have the option of applying for the coverage at only \$10 per year.

When submitting student applications, please append a list of those who desire the liability insurance or make sure the "insurance?" box is marked and that sufficient funds are included to cover each of those students at \$10 per name.

AMERICAN DENTAL ASSISTANTS ASSOCIATION

35 East Wacker Drive, Suite 1730, Chicago, Illinois 60601-2211
312-541-1550 • adaa1@aol.com

INFORMATION FOR PROSPECTIVE STUDENT MEMBERS

The American Dental Assistants Association and its thousands of members represents all members of the dental team: clinical and administrative assistants, receptionists, practice managers, educators and insurance personnel. We offer students an opportunity to join this diverse, professional group for only \$30 per year which includes affiliation with your state association and local component where present.

Some of the benefits of student membership are as follows:

- THE DENTAL ASSISTANT JOURNAL – Six times per year
- DISCOUNTED CONTINUING EDUCATION – Courses for Certification and Registration
- PROFESSIONAL LIABILITY INSURANCE – at just \$10 per year extra
- \$2,000 ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE – free
- OPTIONAL MEDICAL & HOSPITAL INSURANCE PROGRAMS – In most states for those qualified
- LOCAL ACTIVITIES – Local and state meetings in most areas, state newsletter or journals, legislative reports
- LIAISON WITH OTHER HEALTH PROFESSIONALS
- SPECIAL STUDENT PIN
- REDUCED HOTEL AND TRAVEL RATES
- SPECIAL STUDENT CREDIT CARD PROGRAM – for those qualified
- INTERNET RESUMÉ POSTING – FREE
- REDUCED DUES – for three years after student membership expires

Other Information:

- Duration of student membership is to 12/31/2010.
- Applications cannot be processed without complete school information and instructor's signature, and complete mailing address of each student
- Once you become an ADAA member, you automatically belong to a state Dental Assistants Association and, where present, a local Dental Assistants Society. Student dues cover all three.
- Professional liability insurance coverage is not included in dues for student members but is available for an annual premium of \$10 for \$1 million aggregate coverage
- \$4 of each student payment is rebated to the state DAA
- The special student rate may not be combined with any other discount

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STUDENT APPLICATION • VALID THROUGH 12/31/10

Please type or print — No abbreviations please — You may duplicate this form

For office use only

ID# _____

Name of School _____

Address _____ City _____ State _____ Zip _____

School Phone: (_____) _____ Fax: (_____) _____ E-mail: _____

Check box by each student name for which additional \$10 insurance fee is included

STUDENT #1 Insurance?

Name _____

Address _____ Apt # _____ City _____ State _____ Zip _____

Phone: (_____) _____ State DAA _____ Local _____

Cell Phone: (_____) _____ E-mail: _____

Were you previously a member of ADAA? Yes No

STUDENT #2 Insurance?

Name _____

Address _____ Apt # _____ City _____ State _____ Zip _____

Phone: (_____) _____ State DAA _____ Local _____

Cell Phone: (_____) _____ E-mail: _____

Were you previously a member of ADAA? Yes No

STUDENT #3 Insurance?

Name _____

Address _____ Apt # _____ City _____ State _____ Zip _____

Phone: (_____) _____ State DAA _____ Local _____

Cell Phone: (_____) _____ E-mail: _____

Were you previously a member of ADAA? Yes No

STUDENT #4 Insurance?

Name _____

Address _____ Apt # _____ City _____ State _____ Zip _____

Phone: (_____) _____ State DAA _____ Local _____

Cell Phone: (_____) _____ E-mail: _____

Were you previously a member of ADAA? Yes No

PLEASE COMPLETE: Student membership dues: _____ at \$30 each = \$ _____

Voluntary \$10 per student insurance fee: _____ at \$10 each = \$ _____

Total amount enclosed: \$ _____

Dues are not refundable or transferable. Please, no student checks unless certified!

Instructor's Signature

Instructor's Printed Name

Remit payment to: **AMERICAN DENTAL ASSISTANTS ASSOCIATION**
35 East Wacker Drive, Suite 1730, Chicago, Illinois 60601-2211

You may duplicate this application, but do not copy back-to-back. One side only!

Student rate applications may NOT be combined with any other discount.

Please print legibly.