



Georgia Society
of Anesthesiologists



Georgia Academy
of Anesthesiologist Assistants

Anesthesiologist Assistant Joint Membership Application

Checks should be made payable to Georgia Society of Anesthesiologists and mailed to
GSA, 1231 Collier Rd, Suite J, Atlanta, GA 30318.

Membership Category (check one):

Anesthesiologist Assistant (\$150 annually)

AA Student (\$75 one time)

Contact Information:

Full Name: _____ Date of Birth: _____ Gender: Male or Female

Mailing Address:

City: _____ State: _____ Zip Code: _____ Fax: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Primary email: _____ Secondary email: _____

Education and Training:

School: _____ Years: _____ Degree: _____

Current Appointment: _____ Location: _____

Student Applicants Only:

Training Site: _____ Proposed Graduation Date: _____

Please fax complete applications to (404) 249-8831 or mail to 1231 Collier Rd, Suite J, Atlanta, GA 30318.
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For more information, call 404-249-9178 x 6 or visit www.gsahq.org/gsa-and-gaaa-mem.