



MARYLAND MGMA VOLUNTEER FORM

Name: _____

Job Title: _____

Organization: _____

Email: _____

Phone Number: _____

**I WOULD LIKE TO VOLUNTEER WITH MDMGMA ON THE FOLLOWING
COMMITTEE(S):**

- Educational Planning
- Government Affairs
- Member & Corporate Development

PLEASE SEND COMPLETED FORMS TO MDMGMA BY:

Email: info@marylandmgma.com

or

Fax: 888.327.3449