



2026-2027 MAND MEMBERSHIP FORM

Directions please mail the following:

- Completed form
- Proof of membership of your Academy of Nutrition Dietetics membership (either receipt or copy of your AND card)
- Check (make payable to MAND)

Mail to:
MAND Membership
PO BOX 11345
Memphis, TN 38111

**Only mail this form if you are not submitting the form online.
This will help MAND process your membership faster.**

Membership Directory Information

Name: _____ Credentials: _____

Academy Number: _____

Place of Employment: _____

Job Title: _____

Preferred Email (for MAND communications): _____

Phone Number: _____

Please send me more information about volunteer opportunities.

- Yes
- No

2026-2027 MAND MEMBERSHIP DUES:

- \$35.00: Active RD/RDN or DTR
- \$15.00: Retired RD/RDN or DTR
- \$10.00: Dietetic Intern or Student

If you would like to make a contribution to the MAND student scholarship fund, please check the appropriate box:

- \$5.00
- \$10.00
- \$25.00
- Other Amount: _____

Thank you for supporting MAND and we hope to see you this year!!!