



# MEMBER Profile

We want to provide you with the most up-to-date happenings and information about the medical community in Louisville. The information provided below will be featured in our Annual Pictorial Roster, which is used by our members as a networking and referral guide.

Contact McKenna Byerley with questions at (502) 736-6362 or [mckenna.byerley@glms.org](mailto:mckenna.byerley@glms.org).



Email your photo to [photos@glms.org](mailto:photos@glms.org)

*(you will only be listed in the roster if we have a photo)*

First, Middle, Last Name	<input type="text"/>		
Date of Birth	<input type="text"/>	Personal Email	<input type="text"/>
			<i>(for communications from GLMS, not printed in roster)</i>
Spouse Name	<input type="text"/>	Business Email	<input type="text"/>
			<i>(will be printed in the roster)</i>
Office Name	<input type="text"/>		
Office Address	<input type="text"/>		
Office Phone	<input type="text"/>	Office Fax	<input type="text"/>
	<i>(if working at more than one office, please provide all)</i>		
Office Website	<input type="text"/>		
Home Address	<input type="text"/>		
	<i>(we won't print this, but we will use it to send our monthly magazine)</i>		
Cell Phone	<input type="text"/>		
	<i>(will not be printed)</i>		
Specialty	<input type="text"/>	Specialty 2	<input type="text"/>
Medical School	<input type="text"/>		
Medical School Year Graduated	<input type="text"/>	Degree	<input type="text"/>
Board Certification	<input type="text"/>		
	<i>(if applicable)</i>		
NPI #	<input type="text"/>	Medical License #	<input type="text"/>
Direct Secure Message [DSM] Email	<input type="text"/>		

Please return this sheet in the provided prepaid envelope or send to 328 E. Main St. Louisville, KY 40202 or [mckenna.byerley@glms.org](mailto:mckenna.byerley@glms.org)