

# MEMBERSHIP ENROLLMENT FORM

## FEDERAL MEMBERSHIP



Any pharmacist/technician who works directly for the federal government (including civil service, uniformed service, Title 38, etc.) or is retired from federal employment is eligible for APhA Federal Pharmacist/Technician membership. Contract or consulting pharmacists do not qualify for Federal Membership.

### SECTION 1: Contact Information

☐ Mr. ☐ Ms. ☐ Dr. Rank: \_\_\_\_\_ Other: \_\_\_\_\_

FIRST NAME	INITIAL	LAST NAME	SUFFIX	DESIGNATIONS (e.g., PharmD, RPh)
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### PREFERRED E-MAIL ADDRESS (REQUIRED)

Providing your e-mail address allows you to receive timely updates from APhA and important news and information. APhA does not sell or distribute member e-mail addresses.

PREFERRED FAX NUMBER

HOME ADDRESS

CITY	STATE	ZIP CODE	HOME TELEPHONE
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WORK NAME & ADDRESS

CITY	STATE	ZIP CODE	TITLE/POSITION	BUSINESS TELEPHONE
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PREFERRED MAILING ADDRESS: ☐ HOME ☐ WORK

COLLEGE/SCHOOL OF PHARMACY ATTENDED

YEAR OF GRADUATION (REQUIRED)

### SECTION 2 (Required): Membership Category and Federal Service

#### ☐ Federal Pharmacist Member – \$125

- ☐ Active duty (Uniformed Services)
- ☐ Retired
- ☐ Reserve (Uniformed Services)
- ☐ Civil Service:
  - ☐ Active Duty
  - ☐ Reserve

#### ☐ Federal Pharmacy Technician Member – \$55

If you belong in a different membership category, please visit [www.pharmacist.com/JoinAPhA](http://www.pharmacist.com/JoinAPhA) to access the appropriate Member Enrollment Form.

#### Federal Service – choose only one

- |                                      |                                      |                                    |
|--------------------------------------|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Army        | <input type="checkbox"/> Navy        | <input type="checkbox"/> Air Force |
| <input type="checkbox"/> PHS         | <input type="checkbox"/> Coast Guard |                                    |
| <input type="checkbox"/> VA          | <input type="checkbox"/> Civilian    |                                    |
| <input type="checkbox"/> Other _____ |                                      |                                    |

### SECTION 3: (Required) Academy Section and Special Interest Group Selection

APhA has two Academies– APhA Academy of Pharmacy Practice and Management (APhA-APPM) and APhA Academy of Pharmaceutical Research and Science (APhA-APRS). As a member you can choose to join as many Academy Sections and Special Interest Groups (SIGs) within **APhA-APPM** and/or **APhA-APRS** BUT you must designate **ONE Academy** as a primary group for the purpose of voting. To join a SIG, you must select APhA-APPM as your primary, or secondary, Academy. Voting in APhA-APPM will be at the Academy level, not at the SIG level.

**Please circle the P to denote your primary voting area and circle S for your secondary areas.**

#### **P S** APhA-APPM:

Special Interest Groups: *Select as many as you wish, however to join any SIG you must select APhA-APPM as your primary, or secondary, selection..*

- |   |  |
|---|--|
| <input type="checkbox"/> Compounding SIG            | <input type="checkbox"/> Nuclear Pharmacy Practice SIG           |
| <input type="checkbox"/> Diabetes Management SIG    | <input type="checkbox"/> Pain, Palliative Care and Addiction SIG |
| <input type="checkbox"/> Immunizing Pharmacists SIG | <input type="checkbox"/> Preceptor SIG                           |
| <input type="checkbox"/> Medical Home/ACO SIG       | <input type="checkbox"/> Transitions of Care SIG                 |
| <input type="checkbox"/> Medication Management SIG  |  |

#### **APhA-APRS:**

Sections: *Select as many as you wish. Please circle Primary or Secondary.*

- |   |   |   |
|---|---|---|
| P | S | Basic Sciences                                |
| P | S | Clinical Sciences                             |
| P | S | Economic, Social and Administrative Sciences. |

**SECTION 4: Journals & Publications**

- Members receive full access to APhA's **DrugInfoLine** ([www.aphadruginfoline.com](http://www.aphadruginfoline.com)), the **Journal of Pharmaceutical Sciences (JPharmSci)** and **Pharmacy Today**.
- Members also may **choose** between the online or print version of the **Journal of the American Pharmacists Association (JAPhA)**.

Please select one of the following:

- ☐ Access **JAPhA** online only! (Go green!) OR
- ☐ Access **JAPhA** in print!

\* Not all members are eligible for all benefits. Please refer to [www.pharmacist.com](http://www.pharmacist.com) for a complete list of benefits by member type.

- Bonus Benefits:** APhA members are now eligible for a 20% discount off subscriptions to **Pharmacotherapy**, **International Journal of Pharmaceutical Compounding (IJPC)**, and a 20% registration discount to the IJPC website: [www.compoundingtoday.com](http://www.compoundingtoday.com) (restrictions apply).
- Please subscribe me to the **online version** of **Pharmacotherapy**, official journal of ACCP, for an additional fee of \$76 (20% off the \$95 subscription rate). Please add \$76 to the total due in **Section 6**.

To subscribe to **IJPC**, visit [www.IJPC.com/Subscribe](http://www.IJPC.com/Subscribe); to register for the website, visit <http://compoundingtoday.com/Register>.

For additional information, visit [www.pharmacist.com/JoinAPhA](http://www.pharmacist.com/JoinAPhA).

A portion of your dues payment is allocated to your subscription of *JAPhA* (\$25) and *Pharmacy Today* (\$14). These amounts cannot be deducted from your dues total.

**SECTION 5: Voluntary Contribution**

**APhA Foundation**    ☐ \$50.00 USD    ☐ \$500.00 USD  
☐ \$100.00 USD    ☐ Other \$ \_\_\_\_\_

**APhA Foundation Donation**

**The APhA Foundation is pharmacy's philanthropy!** Our mission is to improve people's health through pharmacists patient care services. Our research, public education and recognition programs advance patient care and add value to the health care system. Learn more at <http://www.aphafoundation.org/> or [APhAfoundation.org](http://APhAfoundation.org). Make a tax deductible contribution today.

**SECTION 6: Your Dues Payment**

**Membership Dues Amount (Based on the Membership Category):** \$ \_\_\_\_\_

**Optional Fees for Publications from Section 4** \$ \_\_\_\_\_

**Living outside the US or Puerto Rico?**

Add a \$100 postage surcharge for mailing APhA periodicals. (Does not apply to APO or FPO addresses.) \$ \_\_\_\_\_

**Voluntary Contribution from Section 5** \$ \_\_\_\_\_

**Total Payment** \$ \_\_\_\_\_

☐ Check made payable to APhA in US dollars drawn on a US bank

☐ Credit Card:    ☐ Visa    ☐ MasterCard    ☐ AMEX

CREDIT CARD NUMBER

EXPIRATION DATE

CARDHOLDER SIGNATURE

**SUBMIT ENROLLMENT FORM WITH PAYMENT:**

**American Pharmacists Association®**  
Improving medication use. Advancing patient care.

■ **By Mail:** Send form and payment to **APhA Membership**,  
**P.O. Box 411, Annapolis Junction, MD 20701-0411**

■ **By Fax:** Fax with credit card payment to: **1-240-554-2367**

You will receive your new member package within 2 weeks of enrollment. Questions? Please contact a Member Services Representative at 800-237-APhA (2742).

Under IRS guidelines, the full amount of your gift to the **APhA Foundation** is a deductible contribution. Contributions or gifts to **APhA** are not deductible as charitable contributions for federal tax purposes. However, dues may be deductible as an ordinary and necessary business expense. Pursuant to the Omnibus Budget Reconciliation Act of 1993, 35% of your APhA dues is attributable to nondeductible lobbying activity and is therefore not deductible under Internal Revenue Code Section 162 as an ordinary and necessary business expense. See your personal tax advisor for additional information.