

INSTRUCTIONS

All applications are subject to review. To apply, complete the information below and submit along with a copy of your current curriculum vitae. If not indicated on your CV, please include a current list of your publications.

Please type or print legibly. ASCPT will use the information provided for all correspondence and for the Online Membership Directory.

INDICATE MEMBERSHIP CATEGORY FOR WHICH YOU ARE APPLYING

- FULL** For applicants who have earned a doctorate degree in any of the biomedical sciences, or have evidence of an equivalent of a doctorate degree in training or experience. He/she must demonstrate his/her sincere interest in and contributions to human pharmacology and therapeutics by documenting specific examples such as publications, grants, patents, FDA reports (NDAs and INDs) and internal company reports.
- ASSOCIATE NOT IN TRAINING**
For applicants who do not meet the requirements for FULL membership but exhibit an interest in human pharmacology and therapeutics.
- ASSOCIATE IN TRAINING**
For applicants who are currently enrolled in a post-doctoral training program and have an interest in human pharmacology and therapeutics. AIT eligibility ends upon completion of the training program.
- STUDENT**
For applicants who are pursuing a post-baccalaureate degree and who have an interest in human pharmacology and therapeutics. Student member eligibility ends upon receipt of degree.

MEMBER INFORMATION

Name _____
 Degree _____
 Title _____
 Company/Institution _____
 Address _____

 City _____
 State/Country _____ Zip/Postal Code _____
 Phone Number _____ Fax Number _____
 Email address _____
 Date of birth _____ Gender: Male Female

Associate in Training Applicants

Please indicate the date you expect to complete your fellowship:

SUBMISSION INFORMATION

Complete the membership application and mail or fax it to the ASCPT office today!

MAIL ASCPT
 528 North Washington Street
 Alexandria, Virginia 22314 USA

FAX 703-836-5223

PAYMENT INFORMATION

- FULL** US \$395
 International \$428
- ASSOCIATE NOT IN TRAINING**
 US \$395
 International \$428
- ASSOCIATE IN TRAINING**
 US \$140
 International \$173
- STUDENT**
 US \$55
 International \$88

- Check (must be drawn on a US bank)
- VISA MasterCard American Express

Amount enclosed \$ _____

Credit Card Number _____

Expiration date _____

Card Security Code _____

Name of Cardholder (*printed*) _____

Signature of Cardholder _____

Email a receipt to: _____

I understand that completion of this form constitutes an official application for membership in ASCPT and that I will be notified of my membership status upon action by the Society.

Applicant's Signature _____

Date _____