



## 2010/2011 MEMBERSHIP APPLICATION/RENEWAL FORM

New Member     Renewing Member

*Please type or print all information.*

First Name	MI	Last Name	Degree(s)
Department			
Institution			
Medical School (if different than Institution)			
Street Address			
City	State	Zip Code	
Office Phone	Fax	Email	
Faculty Profile URL (University, Linked-In, etc.)			

### Current Position

*(Check as many as apply)*

- |   |  |
|---|--|
| <input type="checkbox"/> Lecturer in Human Behavior, Psychopathology or Clerkship | <input type="checkbox"/> Director, Human Behavior, Interviewing or equivalent course |
| <input type="checkbox"/> Clinical Attending for Psychiatry Clerkship              | <input type="checkbox"/> Asst or Assoc Director, Medical Student Education           |
| <input type="checkbox"/> Director or Site Coordinator, Clerkship in Psychiatry    | <input type="checkbox"/> Director, Medical Student Education                         |
| <input type="checkbox"/> Director, Psychopathology or equivalent course           | <input type="checkbox"/> Director or Vice-Chair, Psychiatry Education                |
| <input type="checkbox"/> Other: _____   | <input type="checkbox"/> Chair, Department of Psychiatry                             |

### Membership Referral

Do you have a colleague who may benefit from joining ADMSEP? Please print their name here:

\_\_\_\_\_

### Affiliated Memberships

*(Check as many as apply)*

- AAP     
  AADPRT     
  AACDP     
  AACAP

### Type of Membership

#### Active (Voting)

- U.S. Dues      \$295.00  
 International      \$350.00

#### Associate (Non-voting)

- House Officer      \$20.00  
 Coordinator/ Administrator      \$20.00

Active Member benefits include a subscription to *Academic Psychiatry*, listserv access, *ADMSEP Newsletter*, & members-only ADMSEP web access.

Associate Member benefits include access to listserv, *ADMSEP Newsletter*, members-only ADMSEP web access.

### Membership Payment

Annual membership expiration is June 30th.

Dues may be paid by

- Enclosing a check made out to **ADMSEP** (Check must be drawn on a U.S. bank), or
- Credit Card through PayPal (additional fees apply). Go to [www.admsep.org/MembershipApplication.html](http://www.admsep.org/MembershipApplication.html)

**TOTAL \$** \_\_\_\_\_

**PHOTO:** Please email [gbeck@unmc.edu](mailto:gbeck@unmc.edu) with a photo for the member directory.

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