

# 2022 Application for Prorated Individual Membership

The AASM Membership term runs on a calendar year basis (January to December).  
The pricing below is valid from June 1, 2022 – September 31, 2022

## Personal Information (Required)

Name: (Last)	(First)	(Middle)	Suffix:
Degree(s):		Date of Birth:	Gender: <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Non-Binary
Medical School:		Graduation Year:	NPI #:

## Contact Information (Please provide both addresses and check preferred mailing address & email.)

Professional Address:			
Business Name:			
City:	State:	Postal Code:	Country:
Phone:	Fax:	Email:	
Home Address:			
City:	State:	Postal Code:	Country:
Home Phone:	Mobile:	Fax:	
Email: (Email is your username on <a href="http://aasm.org">aasm.org</a> )			
Preferred Mailing Address: <input type="radio"/> Professional Address or <input type="radio"/> Home Address			

## Board Certification (Required if applicable; check all that apply; must be completed if applying for regular membership)

Are you certified by the American Board of Medical Specialties in sleep medicine? <input type="radio"/> Yes or <input type="radio"/> No					
Please select your primary board certification:					
<input type="radio"/> Anesthesiology	<input type="radio"/> Family Medicine	<input type="radio"/> Internal Medicine	<input type="radio"/> Otolaryngology	<input type="radio"/> Pediatrics	<input type="radio"/> Psychiatry & Neurology
<input type="radio"/> Obstetrics & Gynecology	<input type="radio"/> Surgery				

## I am a... (Check one)

<input type="radio"/> Physician	<input type="radio"/> Respiratory Therapist	<input type="radio"/> Nurse/ Nurse Practitioner	<input type="radio"/> Sleep Center Manager
<input type="radio"/> Industry	<input type="radio"/> Professional Counselor	<input type="radio"/> Physician Assistant	<input type="radio"/> Student
<input type="radio"/> Psychologist	<input type="radio"/> Researcher	<input type="radio"/> Sleep Technologist	<input type="radio"/> Other

## Diversity, Equity, & Inclusion

The AASM recognizes that the diversity of its community is a vital component of the AASM's mission: Advancing sleep care and enhancing sleep health to improve lives. Please complete the demographic questions below to help the AASM assess our current efforts and determine areas for internal improvement in committee selection, programming, etc. Data collected will only be used in aggregate and will not be shared outside the AASM.

### What is your current practice setting (Check all that apply)

<input type="radio"/> Academic	<input type="radio"/> Employed Physician Practice	<input type="radio"/> Military	<input type="radio"/> Group Practice (Equity Owner)
<input type="radio"/> Solo Practice (Owner)	<input type="radio"/> Other, please specify		

### How do you identify your race? (Check all that apply)

<input type="radio"/> Asian (Wouth/East/Southeast Asian)	<input type="radio"/> Middle Eastern	<input type="radio"/> Black/African American
<input type="radio"/> White/Caucasian	<input type="radio"/> Native American/Alaskan	<input type="radio"/> Hispanic/Latinx
<input type="radio"/> Hawaiian/Pacific Islander	<input type="radio"/> Not listed	<input type="radio"/> Choose not to disclose

### Do you have a disability that requires any modifications or accommodations? (Check all that apply)

<input type="radio"/> Visual	<input type="radio"/> Hearing	<input type="radio"/> Speech	<input type="radio"/> Mobility impairment	<input type="radio"/> Not listed
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### Primary reason for joining the AASM

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**Section 1: Membership Category and Requirements** (Please check the membership category for which you are applying)

Membership is on a calendar-year basis (January 1, 2022 - December 31, 2022).	
<b>FULL MEMBERSHIP</b> For individuals who hold an MD, DO, PhD, DDS, DNP, or other healthcare doctoral degree and are active in sleep disorders medicine.	
Select your career level below for applicable pricing.	
<input type="radio"/>	<b>REGULAR: <del>\$250</del> \$175</b> For individuals who hold an MD, DO, PhD, DDS, DNP, or other healthcare doctoral degree and are active in sleep disorders medicine.
<input type="radio"/>	<b>IN-FELLOWSHIP TRAINING: \$50 (18 Month Membership from July 1, 2022 – December 31, 2023)</b> For United States based physicians participating in an ACGME-accredited sleep medicine fellowship training program, or similar training program as approved by the Board of Directors. Program verification required.
<input type="radio"/>	<b>EARLY CAREER PHYSICIAN: <del>\$125</del> \$90</b> For Individuals less than three years removed from a fellowship training program. Verification required.
<input type="radio"/>	<b>RETIRED: <del>\$400</del> \$75</b> For individuals 65 or older who are working zero hours per week in the field of sleep medicine. No voting privileges.
<input type="radio"/> <b>STUDENT AND RESIDENT MEMBERSHIP: \$0</b> Individuals in formal training, such as medical school, residency, a master's degree program, a non-sleep medicine fellowship program, a Ph.D. program, or similar program as approved by the Board of Directors. (A letter from your program director verifying your student status must be submitted within 2 weeks of your application)	
<input type="radio"/> <b>AFFILIATE MEMBERSHIP: <del>\$250</del> \$175</b> Individuals, who are not eligible for other membership categories, are eligible for Affiliate Membership if they are active in clinical and/or research aspects of sleep medicine.	
<input type="radio"/> <b>TEAM MEMBERSHIP: <del>\$200</del> \$150</b> Individuals who have special training in the healthcare field such as Nurse Practitioners, Physician Assistants, Nurses, Sleep Technologists, Respiratory Therapists, Office/Center Managers, Medical Assistants, or other professionals as approved by the Board. Discounted membership pricing available to staff who are employed by an AASM Facility Member - <del>\$400</del> \$50	
*The above prices are valid if you join from June 1, 2022 to September 30, 2022. If you are applying for membership outside of these dates, please visit the AASM website at <a href="http://aasm.org">aasm.org</a> for the most current membership dues information or to apply online.	
<b>Section 1 Subtotal</b>	<b>\$</b>

**Section 2: Resources & Donations** (check all that apply)

<b>International Classification of Sleep Disorders – Third Edition (ICSD-3) Print Version:</b> Updated in 2014, the third revision to the ICSD-3 features significant content changes, including new nomenclature, classifications and diagnoses. The book also features accurate diagnostic codes for the corresponding ICD-9 and ICD-10 diagnoses at the beginning of each diagnosis section of the ICSD-3. This is an essential reference for all clinicians with sleep disorders patients.	<input type="radio"/> <b>\$65* + shipping</b>
<b>AASM Foundation Contribution:</b> The AASM Foundation promotes high-quality education and research within the sleep medicine field by supporting young and established investigators through grant opportunities. These grants, which are critical to the advancement of the field and in educating the public about sleep, are possible because of member support. (Suggested Contribution: \$100)	<input type="radio"/> <b>\$</b>
<b>AASM Scoring Manual Print Copy:</b>	<input type="radio"/> <b>\$30* + shipping</b>
<b>Section 1 Subtotal:</b>	<b>\$</b>
<b>Section 2 Subtotal:</b> (add all lines in Resources & Donations section)	<b>\$</b>
<b>Flat Shipping Rate:</b> (If applicable)	<input type="radio"/> <b>\$13</b>
<b>Total</b>	<b>\$</b>

**Method of Payment** (Please check one box below. Purchase orders are not accepted as payment of membership dues.)

<b>Save time!</b> Enroll in the automatic renewal program using the credit card below. (See terms and conditions below) <input type="radio"/> <b>Yes</b>			
<input type="radio"/> Check payable to the AASM (U.S. funds drawn on a U.S. bank)		Credit card: <input type="radio"/> Visa <input type="radio"/> MasterCard <input type="radio"/> American Express <input type="radio"/> Discover	
Total: \$	Card Number:	Exp. Date:	
Validation Code*:	Billing Address:		
Cardholders Name:	Signature:	Date:	
*For a VISA, MasterCard or Discover, the validation code is the last 3 number in the signature box on the back of the card. For American Express, the validation code is the 4 numbers above the credit card number on the front of the card.			
The Revenue Act of 1987 requires the following statement to be published: "Membership dues are not deductible as charitable contributions." However, dues may be deductible as a business expense. The Revenue Reconciliation Act of 1993 requires that the AASM disclose the percentage of your dues that relate to nondeductible lobbying expenses. The AASM estimates that in 2022, 2% of your dues will represent such nondeductible lobbying expenses. You will need to reduce any claimed deduction for AASM dues by this amount.			
<b>Terms and Conditions for Automatic Renewal</b> By opting in for automatic renewal of your American Academy of Sleep Medicine (AASM) membership, you agree to our <b>Terms and Conditions for Automatic Renewal</b> , and authorize AASM to automatically debit your bank account/debit card or charge your credit card on an annual basis, unless you cancel your subscription. <b>Terms and Conditions for Automatic Renewal:</b> Enrollees will receive an annual reminder notice for the next membership year during the first week of November. AASM will charge the full amount of the annual membership dues on December 15 for that year's membership dues to the payment method provided. Individuals transitioning into a new membership category, will be notified of the change and charged for that category's established dues rate. <b>Automatic renewal enrollees have until the second Friday of December of the current year to cancel automatic AASM membership renewal for the upcoming year</b> by contacting us in writing at one of the methods provided above, after which time, individuals are eligible for a full refund of their AASM membership dues until February 28 of the current year.			