

**AMERICAN ACADEMY OF PHYSICIAN ASSISTANTS IN LEGAL MEDICINE
MEMBERSHIP FORM AND RECEIPT**

Membership requires two steps:

- 1) Pay your dues: Use this form and mail with check payable to “AAPALM” to the Treasurer OR pay online at the www.aapalm.org website
- 2) Complete or update your directory contact information. Instructions will be sent once dues are received. Renewing members will have this information. If you have forgotten how to do this, email aapalm.members@gmail.com

Dues apply from July 1- June 30 each year. Dues are half the cost if paying after January 1 of each year as dues are only valid through June 30 of each year.

NAME: _____

ADDRESS: _____

PHONE(S): _____

EMAIL: _____

PLEASE CHECK ALL THAT APPLY

_____ New Fellow Member - \$50 enclosed____; OR \$50 paid on website____,date_____

_____ Renewing Fellow Member - \$50 enclosed____ ;OR \$50 paid on website____,date_____

_____ New Fellow Member paying after January 1- \$25 enclosed____; OR Paid on website____, date_____

_____ Renewing Fellow Member paying after Jan. 1- \$25 enclosed____; OR Paid on website____, date_____

_____ Student member – free

_____ I have entered or updated my directory information (email aapalm.members@gmail.com if you have forgotten how to do this)

Submit checks or questions to:

Melisa Moncure, J.D, MBA

Treasurer, AAPALM

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moncure@bcm.edu

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