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## ASPMN Membership Renewal Form

*It is time to renew your membership in ASPMN!* **PLEASE RETURN THIS ENTIRE FORM WITH YOUR PAYMENT SO WE CAN PROPERLY CREDIT YOUR DUES.**

First Name: \_\_\_\_\_ Middle Name or Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_ Credential (Optional: i.e. PhD, MS, BS): \_\_\_\_\_

### Work Address:

Company Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Fax: \_\_\_\_\_

Work Email: \_\_\_\_\_

### Home Address:

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Fax: \_\_\_\_\_

Home Email: \_\_\_\_\_

*Please indicate your preferred mailing address:*  Work  Home

*Please exclude my information from ASPMN's membership directory:*  Yes  No

*Please exclude my information from ASPMN's mailing list rental to outside organizations:*  Yes  No

Please renew my membership at the following membership level:

- Active - \$95.00
- Associate - \$80.00
- Student - \$40.00
- International - \$105.00

I would like to contribute to the ASPMN:  Jean Guveyan Educational Fund \$ \_\_\_\_\_

Legacy Link Fund \$ \_\_\_\_\_

Research Fund \$ \_\_\_\_\_

### PAYMENT INFORMATION Tax ID #58-1905277

Check made payable to ASPMN in U.S. Dollars  Visa  MasterCard  American Express  Discover

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_

### RENEW ONLINE!

You can now renew your ASPMN membership online. Go to the ASPMN website and follow the instructions to pay your dues online.

To access your account you must first login. Your login is the first initial of your first name plus the first initial of your last name, plus your ASPMN ID number (listed above); example (JD12345). Your password is ASPMN1. After logging in, select the "Pay Your Dues Here" tab to renew your membership. If you have difficulties with your login ID or password, or you need to change your membership type, please contact our office at (888) 34-ASPMN or [aspmn@goamp.com](mailto:aspmn@goamp.com). If you have a change of address, please submit a written change of address to our office. You can also complete this form and fax or mail it to the Executive Office to complete your membership renewal.