



ASET – The Neurodiagnostic Society

402 East Bannister Road, Suite A
Kansas City, MO 64131-3019
Tel: 816.931.1120 • Fax: 816.931.1145
info@aset.org • www.aset.org

2020 ASET INSTITUTIONAL MEMBER EMPLOYEE ADD-ON FORM

Please use this form to enroll additional employees under your organization’s Institutional membership at the time of your annual membership renewal and/or during the membership/calendar year. If your enrollment of additional employees exceeds the one primary billing contact and four employees included with the base \$500 annual Institutional member dues (US), please include the applicable employee add-on fee for each additional employee you are enrolling on this form. (Membership runs from January through December. First-year member dues are pro-rated based on join date. The add-on employee dues for US individuals added from January through March are \$86; \$65 for April through June; \$43 for July through September; and \$86 for October through December of the following year.) There is no limit to the number of employees that an Institutional member may enroll.

Each member will receive an email with their username and password after the application is processed which will enable individuals to access the Members Only section of the ASET website as well as directly qualify for member rates when registering for education events and ASET online courses, and making purchases through the ASET Store. Individuals may change their login and/or password, and update their personal profiles, at any time by logging in to the Members Only section of the ASET website. An ASET 2020 member card will be mailed to each employee enrolled through this form. If you have any questions completing this form, please contact the ASET Executive Office at 1.816.931.1120, ext. 107 or darla@aset.org.

Section I: Institution

Institutional Member Organization Name: _____

Authorization is hereby given to enroll the individual(s) identified in Section II below as employee members under our organization’s ASET Institutional Membership.

This individual is (*check one*):

- a new employee to be enrolled under our Institutional membership
- an employee replacing a current/former employee previously enrolled under our Institutional membership
(**enter first and last name of employee whose membership under your Institution is to be de-activated** _____)

Name (printed) of Primary Billing Contact: _____

Signature of Primary Billing Contact

Date

Section II: Add-on Employee Member Information

For each add-on employee, please complete the following information. Please duplicate this section and attach to this form if more space is required.

Add-on Employee 1:

Last Name: _____ First Name: _____ Middle: _____

Mailing Address if different than Institution mailing address:

Street Address: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

Business Phone: (_____) _____ Home Phone: (_____) _____

Email: _____ * Required field. Employee login and password to access the Members Only pages of the ASET website will be automatically assigned and emailed to the employee upon approval of application. Employee may change his/her login and password at any time thereafter.

Check appropriate credentials, if any:

R. EEG T. R. EP T. RPSGT CNIM R.NCS.T. CLTM CAP MEG Other _____

Check appropriate degrees, if any:

AA AS BA BS MA MS MEd PhD Other _____

ASET-CEUs and statistical data information: Date of Birth ____/____/____ Male Female
(Note: This information is for ASET internal use only for matching and maintaining individual ASET-CEU records. It is NOT published.)

Membership information is included in ASET's searchable online membership directory. However, we recognize the importance of employee privacy and provide options relating to their listing. If no option is selected, employee's name will be included in the searchable member directory.

- Employee information as noted above can be included in the online member directory.
- Employee information is not to be included in the online member directory.

Optional Information: ASET Interest Section Forums, a member-only benefit, are interactive discussion forums where members may share tips and resources, ask questions of one another and help colleagues solve problems or gain new insight into issues. Interest Sections also meet at the ASET Annual Conference for face-to-face networking. From the list below, please select as many sections in which you have an interest and with which you would like to be identified. ASET's searchable online membership directory includes the ability to search by Interest Section members. If you have provided permission to have your information included in the online membership directory, your Interest Section selections will be included in that search feature.

- General Neurodiagnostic Topics
- Long-Term Monitoring
- Intraoperative Neuromonitoring
- Lab Management
- Innovative Technologies & Practices
- Clinical EEG
- Nerve Conduction Studies
- Pediatrics & Neonatology
- Autonomic Testing
- Neurodiagnostic Education

Section III: Communication Consent

Institutional employee members may opt-in or opt-out from receiving communications from ASET and/or its business associates by logging into the Members Only section of www.aset.org and updating their communication preferences. Opting out will not exclude emails pertaining to your membership such as dues renewal or transaction receipts.

Section IV: Payment Information

- Check or Money Order payable to ASET – The Neurodiagnostic Society (payment must be in US dollars drawn on a US bank)
- American Express Discover MasterCard Visa

Name on Card: _____

Account No: _____

Expiration Date: _____ Billing Zip Code: _____ CID: _____
Month / Year

Cardholder Signature: _____

\$_____ ASET Add-on Dues

\$_____ **TOTAL ENCLOSED** made payable to ASET – The Neurodiagnostic Society (Federal Tax ID#74-1553534)**

Mail or fax this completed form to:

**ASET – The Neurodiagnostic Society
402 East Bannister Road, Suite A
Kansas City, MO 64131-3019
Fax: 816-931-1145**