



# INDIVIDUAL ASSOCIATE MEMBERSHIP 2023 APPLICATION

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MIDDLE \_\_\_\_\_

DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_ PREFERRED EMAIL (required) \_\_\_\_\_  
(ASET Internal Use Only)

PREFERRED PHONE  Home  Cell  Business \_\_\_\_\_

DEGREES CREDENTIALS

AA  BA  MA  MHA  MEd  R. EEG T.  CNIM  R.NCS.T.  CLTM

AS  BS  MS  MD  PhD  R. EP T.  MEG  CNCT  CAP

Other \_\_\_\_\_  RPSGT  D.ABNM  Other \_\_\_\_\_

PREFERRED MAILING ADDRESS  Home  Work EMPLOYER NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**MEMBERSHIP LISTING**

ASET provides a Members Only searchable directory. However, we recognize the importance of your privacy. Please choose whether you would like your information to be included in the Members Only Online Directory. If no option is chosen, the default is yes, include.

**Yes**, include my information in the ASET Members Only Online Directory  **No**, do not include my information

**COMMUNICATION CONSENT**

Federal regulations by the FCC require ASET to have your permission before we can communicate with you via email. You may manage your communications preferences by logging in to your ASET profile. If left unchecked, you will receive ASET emails.\*

**General ASET email messages**  **Third Party emails**

**ASET Emails** – important products, programs and services  **None** – do not send me any email marketing messages

\*This will not exclude emails pertaining directly to your membership such as dues renewal notices or transaction receipts.

**MEMBERSHIP TYPE** (check one box based on date joined)

ASSOCIATE - Physicians, nurses and other healthcare professionals with an interest in neurodiagnostics.	<b>JAN - MAR</b>	<b>APR - JUNE</b>	<b>JULY - SEPT</b>	<b>OCT - DEC</b>
	<input type="checkbox"/> \$139 US	<input type="checkbox"/> \$105 US	<input type="checkbox"/> \$70 US	<input type="checkbox"/> \$139 US

Please email, fax or mail your completed application to:

**ASET – The Neurodiagnostic Society | 312 SW Greenwich Drive, Suite 669 | Lee's Summit, MO 64082**  
816.931.1120 ext. 107 | 816.944.3243 direct/fax | darla@aset.org | www.aset.org

**ASET CHAPTER DUES** (optional; check one box based on date joined)

Chapters are local, state or regional neurodiagnostic organizations that have been officially chartered by ASET. They provide member information, continuing education and timely communication, allowing you the opportunity to stay informed of ever-changing developments in the profession in your region. Joining one or more chapters is optional. One hundred percent of chapter dues collected by ASET are rebated quarterly to the applicable chapters. More information can be found at [www.aset.org/chapterlisting](http://www.aset.org/chapterlisting).

ACTIVE CHAPTER MEMBERSHIPS	TERRITORY COVERED	JAN - MAR	APR - JUNE	JULY - SEPT	OCT - DEC
Louisiana Chapter of ASET	State of Louisiana	<input type="checkbox"/> \$20	<input type="checkbox"/> \$15	<input type="checkbox"/> \$10	<input type="checkbox"/> \$20
Mid-Atlantic Neurodiagnostic Society	States of WV, KY, VA, PA, MD, OH	<input type="checkbox"/> \$25	<input type="checkbox"/> \$20	<input type="checkbox"/> \$15	<input type="checkbox"/> \$25
Missouri Chapter of ASET	State of Missouri	<input type="checkbox"/> \$20	<input type="checkbox"/> \$20	<input type="checkbox"/> \$20	<input type="checkbox"/> \$20
Ohio Neurodiagnostic Society	State of Ohio	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$25	<input type="checkbox"/> \$30
South Carolina Chapter of ASET	State of South Carolina	<input type="checkbox"/> \$25	<input type="checkbox"/> \$19	<input type="checkbox"/> \$13	<input type="checkbox"/> \$25
Washington Chapter of ASET	State of Washington	<input type="checkbox"/> \$30	<input type="checkbox"/> \$23	<input type="checkbox"/> \$15	<input type="checkbox"/> \$30

**PAYMENT INFORMATION**

\$ \_\_\_\_\_ **ASET Dues**  Check or Money Order # \_\_\_\_\_  
(must be in US Dollars drawn on US bank and made payable to ASET)

\$ \_\_\_\_\_ ASET Chapter Dues

\$ \_\_\_\_\_ ASET Foundation Donation  American Express  Discover  MasterCard  Visa

Make Anonymous  
(Gifts made to the ASET Foundation are deductible as a charitable contribution in the year in which they are given.)

NAME ON CARD \_\_\_\_\_

CARD NO. \_\_\_\_\_

EXP. DATE \_\_\_\_ / \_\_\_\_ BILLING ZIP CODE \_\_\_\_\_ CID \_\_\_\_\_

\$ \_\_\_\_\_ **Total Enclosed** CARDHOLDER SIGNATURE \_\_\_\_\_

Dues rates are for the 2023 member year. ASET estimates that the non-deductible portion of your 2023 dues, the portion that is allocable to lobbying activities for Active or Associate is \$31.50 and Student is \$24.50. Annual subscriptions to *ASETNews* and *The Neurodiagnostic Journal* are included with your membership and may not be deducted from dues. Dues portions allotted for publications are \$2 for the newsletter and \$21.40 for the *Journal*. A member may resign or cancel their membership at any time by submitting their resignation, in writing, to [info@aset.org](mailto:info@aset.org). Membership dues are non-refundable. ASET FEIN 74-1553534 | ASET Foundation FEIN 77-0644963