

ASTMH Student/Post-Doc/Resident/Fellow Membership Application

Mail or Fax to: American Society of Tropical Medicine and Hygiene, P.O. Box 88623, Chicago, IL 60680-1618, USA, +1-847-686-2238; Fax: +1-847-686-2253; bfinn@astmh.org

FIRST NAME (GIVEN NAME) _____ LAST NAME (FAMILY NAME) _____ DEGREES _____

INSTITUTION / ORGANIZATION _____

DEPARTMENT _____

ADDRESS _____

CITY _____ STATE _____ POSTAL CODE _____ COUNTRY _____

TELEPHONE _____ FAX _____ E-MAIL _____

NAME OF REFERRING MEMBER _____

ASTMH may provide postal addresses to third parties approved by the ASTMH secretary-treasurer for one-time use. E-mail addresses are never provided. Please check boxes: Exclude from all mailings Exclude from membership directory



Dues are billed on a fiscal year. Dues will expire June 30, 2017.

- | | | | | |
|---|--|---|--|----------|
| <input type="checkbox"/> Student (\$15) <i>check one</i> | <input type="checkbox"/> Undergraduate | <input type="checkbox"/> Graduate | <input type="checkbox"/> Predoctoral | \$ _____ |
| <input type="checkbox"/> Post-Docs/Medical Residents/Fellows (\$25) | | | | \$ _____ |
| <input type="checkbox"/> American Committee on Arthropod-Borne Viruses (ACAV) | | <input type="checkbox"/> Complimentary for Students/Post-Docs/Medical Residents/Fellows | | \$ _____ |
| <input type="checkbox"/> American Committee of Medical Entomology (ACME) | | <input type="checkbox"/> Complimentary for Students/Post-Docs/Medical Residents/Fellows | | \$ _____ |
| <input type="checkbox"/> Clinical Group (ACCTMTH) | | <input type="checkbox"/> Complimentary for Students/Post-Docs/Medical Residents/Fellows | <input type="checkbox"/> Life Membership (\$600) | \$ _____ |
| <input type="checkbox"/> American Committee of Molecular, Cellular and Immunoparasitology (ACMCIP) | | <input type="checkbox"/> Complimentary for Students/Post-Docs/Medical Residents/Fellows | | \$ _____ |
| <input type="checkbox"/> ASTMH Committee on Global Health (ACGH) | | <input type="checkbox"/> Complimentary for Students/Post-Docs/Medical Residents/Fellows | | \$ _____ |
| <input type="checkbox"/> Journal subscription: print (\$40 US; \$100 all others) <i>Membership includes an e-journal subscription</i> | | | | \$ _____ |
| TOTAL ENCLOSED | | | | \$ _____ |

ASTMH Subgroups

American Committee on Arthropod-Borne Viruses (ACAV) Seeks to promote the study of arthropod-borne viruses (arboviruses) through training and travel fellowships, advocacy, and advising the scientific and public health communities in the areas of virus classification, laboratory safety and biocontainment.

American Committee on Clinical Tropical Medicine and Travelers' Health (ACCTMTH) Is the clinicians' group within ASTMH, and includes civilian, military and governmental experts in travelers' health, tropical infection and tropical disease.

ASTMH Committee on Global Health (ACGH) Works to promote the development of the field of Global Health which addresses multidisciplinary transnational approaches to health issues that unfavorably affect under-served and under-resourced populations.

American Committee of Molecular, Cellular and Immunoparasitology (ACMCIP) Works to promote an organization that facilitates interactions among scientists who work in the varied disciplines of parasitology, especially in basic laboratory, pre-clinical and translational research, clinician sciences and population-based sciences.

American Committee of Medical Entomology (ACME) Works to promote medical entomology in the ASTMH and in organizations whose scopes of activities include the area of human diseases transmitted by arthropods.

Student/Post-Doc/Medical Resident/Fellow Member

Complete the following or attach a registrar's letter on institutional letterhead, or a copy of student ID as proof of full-time student status.

This is to certify that the above-named applicant is a full-time Student/Post-Doc/Medical Resident/Fellow at:

NAME OF INSTITUTION _____ SIGNATURE OF DEAN OR DEPARTMENT CHAIR _____ DATE _____

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Support the Work of ASTMH

Every donation helps us continue to work towards our mission of promoting global health through the prevention and control of infectious and other diseases that disproportionately afflict the global poor. We do this in part by providing awards and fellowships that encourage a career in tropical medicine.

My Donation is for the:

Centennial Travel Award in Basic Science Tropical Disease

Research-Endowment Fund (awarded annually to physicians and scientists for field experience in combination with laboratory studies of parasitic, bacterial or viral infectious diseases in endemic developing countries)

\$35 \$75 \$125 Other _____

James W. Kazura AJTMH Page Waiver Fund (honoring Dr. Kazura's [Editor-In-Chief 1998-2013] commitment to helping authors from low income countries offset the cost of publication fees for papers published in the Society's journal, the *American Journal of Tropical Medicine and Hygiene*)

Check here to make your Kazura Fund donation anonymous.

\$35 \$75 \$125 Other _____

Benjamin H. Kean Travel Fellowship in Tropical Medicine-Endowment Fund (awarded annually to support medical students, house staff and fellows involved in clinical or research electives in tropical areas)

\$35 \$75 \$125 Other _____

Alan J. Magill Memorial Fund Donations will fund tropical medicine educational efforts that could include a fellowship, a named lecture, travel award or other endeavors as determined by the ASTMH Council.

\$35 \$75 \$125 Other _____

Robert E. Shope International Fellowship in Infectious Diseases Endowment Fund (awarded annually for short-term research experiences in the tropics studying any tropical infectious disease in arbovirology and/or emerging tropical infectious diseases)

\$35 \$75 \$125 Other _____

Let us decide based on current needs (contributions support ASTMH's research and training opportunities that do not have a designated endowment; gifts will be directed by the Executive Committee or Council)

\$35 \$75 \$125 Other _____

Demographics

To better understand the needs of our diverse membership, please check all that apply from the categories below:

Work Setting* (select primary only)

- Academia
- CDC
- Consultant
- FDA
- For-Profit
- HHS
- Local government
- NIH
- Non-Profit
- Post-Doc/Fellow/Student
- Private Practice
- Retired
- State government
- USAID
- Other

Military Setting (select primary only)

- Air Force
- Army
- Navy

Payment

- AmEx VISA MasterCard Discover Check enclosed

Area of Primary Interest* (check all that apply)

- Bacteriology
- Clinical Tropical Medicine
- Entomology
- Global Health
- Parasitology – Clinical
- Parasitology – Molecular and Cellular
- Virology
- Other

Professional Role* (check all that apply)

- Administration/Executive
- Clinical
- Prevention and Control
- Research
- Teaching
- Other

If you provide direct clinical care (check all that apply)

- Clinical
- Dengue Fever
- Immunizations
- Malaria
- Parasitology
Diagnostic
- Travelers' Health
- Yellow Fever

Year of Birth (optional)

Gender*

- Female
- Male

Highest Level Achieved*

- Bachelors Degree
- Doctorate (PhD, DrPH, ScD, etc.)
- Law Degree
- Masters Degree
- Medical Degree
- Nurse Practitioner
- Physician Assistant
- Registered Nurse
- Veterinary Degree
- Other _____

*Required

CARD#

EXP. DATE

SIGNATURE OF CARDHOLDER

NAME OF CARDHOLDER

Full payment must accompany this application. VISA, MasterCard, Discover and American Express are accepted. All checks must be made in U.S. dollars, drawn on U.S. banks. U.S. postal money orders, and U.S. travelers checks, are accepted.

Contributions and gifts to ASTMH may be deductible as charitable contributions for federal income tax purposes. Dues payments may be deductible by members as an ordinary and necessary business expense. Consult your tax advisor for further information. Tax ID #57-0408245