Membership Enrollment Form

1. Personal Information (where information will be sent—no post office box allowed)		
(Last) · (First)		(Middle)
Name		
Primary Contact ❏ **Home** ❏ **Work**		
Home Address		Work Phone ( )
City/State/Zip		Work Fax ( )
Company Name		Home Phone ( )
Company Address		Cell ( )
City/State/Zip		Email

Local Chapters

To find a local chapter in your area, visit www.aapc.com. AAPC will assign you to the nearest local chapter. You will be able to change the chapter you are assigned to by logging into www.aapc.com.

Coding Edge and Edge*Blast*

Membership includes a one-year subscription to the monthly *Coding Edge* magazine, and Edge*Blast*, a free bi-weekly e-newsletter. Visit www.aapc.com and login to manage your Edge*Blast* subscription.

I am enrolling as a

❏ Regular Member ($125)　　　❏ Student Member ($70)*
*For Student Membership, proof of registration is required.

I hereby certify that I have read, understood and agree to abide by the AAPC Code of Ethics. I understand and agree that my failure to abide by the AAPC Code of Ethics, as determined in the discretion of AAPC, at any time hereafter, may result in the loss of all credentials conferred upon me by AAPC, and of my membership in AAPC. _____ (initial space)

A copy of the AAPC Code of Ethics can be found at www.aapc.com

Payment Options (membership fees are nonrefundable and nontransferable)

❏ Company Check/money order enclosed $ _____ (personal checks not accepted)　Check Number _____

❏ Please charge my credit card account:

　　　　❏ VISA　　　❏ MasterCard　　　❏ Discover　　　❏ American Express

Account Number _____　Expiration Date _____　Amount $_____

Signature _____

Print Card Holder's Name _____

Billing Address: (same as ❏ home) _____

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