|  |  |
| --- | --- |
| **The American Association of Neuropathologists**  8156-E S. Wadsworth Blvd, Suite 197  Littleton, CO 80128  Phone: (720) 372-0888 Fax: (303) 568-0406  Email [aanp@aoeconsulting.com](mailto:aanp@aoeconsulting.com)  Website [www.neuropath.org](http://www.neuropath.org) | **2020 Senior Membership Renewal**  **Pay by Check Form** |

**Member Information:** Please provide your most up-to-date contact information.

|  |  |  |  |
| --- | --- | --- | --- |
| AANP Member ID: | Click or tap here to enter text. | | |
| Full Name: | Click or tap here to enter text. | | |
| Degree: | MD PhD Other: Click or tap here to enter text. | | |
| Company/Organization: | Click or tap here to enter text. | | |
| Address 1: | Click or tap here to enter text. | | |
| Address 2: | Click or tap here to enter text. | | |
| City: | Click or tap here to enter text. | | |
| US State/  Canadian Province: | Click or tap here to enter text. | State/Province/Region (Non US/Canada): | Click or tap here to enter text. |
| Postal Code: | Click or tap here to enter text. | Country: Click or tap here to enter text. |  |
| Phone: | Click or tap here to enter text. | | |
| Fax: | Click or tap here to enter text. | | |
| E-mail: | Click or tap here to enter text. | | |
| Would you like your contact information to be included in the online directory? | | | YES NO |

**Optional Add-Ons:** The following are optional add-ons.

* Print *JNEN* Subscription: The online edition of the *JNEN* is $35.00 and the print edition of the *JNEN* is $60.00.
* SAMs Bundle: Please indicate if you would like to pay $150.00 to receive access to all available self-assessment modules from January 1, 2020 through December 31, 2020.
* Donations: Please indicate if you would like to donate to the association in the table below.

Please complete the section below in order to determine your total payment.

|  |  |
| --- | --- |
| Online JNEN Subscription ($35.00): | $Choose an item. |
| Print JNEN Subscription ($60.00): | $Choose an item. |
| SAMs Bundle ($150.00): | $Choose an item. |
| General Contribution | $Click or tap here to enter text. |
| Endowment Fund | $Click or tap here to enter text. |
| Hirano Award | $Click or tap here to enter text. |
| Terry Award | $Click or tap here to enter text. |
| Korey Fund | $Click or tap here to enter text. |
| Rubenstein Fund Award | $Click or tap here to enter text. |
| Moore Lecture | $Click or tap here to enter text. |
| Weil Fund | $Click or tap here to enter text. |
| Parisi Fund | $Click or tap here to enter text. |
| DeArmond Fund | $Click or tap here to enter text. |
| **Grand Total:** | **$**Click or tap here to enter text. |
| Would you like to be recognized as a donor in the Annual Meeting Program Book? | YES NO |

Please make checks payable to: American Association of Neuropathologists.

*Note:* For foreign checks (checks not drawn from a US bank with a routing number) and Electronic Funds Transfer (EFT), an additional $50 must be added to the payment to cover any bank fees. Contact [aanp@aoeconsulting.com](mailto:aanp@aoeconsulting.com) for more information.