



AAB Associate Member Section

YES, I want to protect my right to enter into, and advance within, the clinical laboratory profession, and to receive the latest news on the CLIA '88 regulations, OSHA and EPA standards and state licensure laws.

Benefits of Membership in the AAB Associate Member Section

Advocate for Clinical Laboratory Technologists, Technicians, Physician Office Laboratory Technicians and Phlebotomy Technicians

- Protecting your right to practice and advance in your career without discriminatory restrictions
- Monitoring and analyzing legislation, regulations, industry trends, including the CLIA '88 rules
- Representing your professional interests before federal, state and local lawmaking bodies and regulatory agencies
- Taking legal action, when necessary, to protect your career opportunities

Individualized Assistance and Information About

- Federal, state, hospital, independent and physician office laboratory personnel regulations and requirements
- Meeting the challenges of rapidly changing laboratory technology and operational methods

Membership Discounts

- Seminar and Convention Registration
- Publications

Educational Programs

- AAB Annual Convention
- State Chapter Seminars

Continuing Education Recording System

- FREE CEU recording system

Professional Relations

- Networking with Peers
- Networking with Other Health Care Workers
- Communication With Other Professional Associations

AAB Bulletin

- A topical newsletter published quarterly providing the latest information on meetings, conventions, legislative and regulatory issues and developments, news from other laboratories, state activities, continuing education programs, and technical information

Educational Publications, Courses

- *PER Basic Laboratory Knowledge Online Course*
- *Proficiency Examination Review (PER) Basic Knowledge Manual*
- *PER Handbook*
- *PER Questions and Answers Book*
- *Physician Office Laboratory Technician (POLT) Handbook*
- *POLT Questions and Answers Book*

Application for AAB Associate Membership

WEB

Type or Print

Name _____

Daytime Phone # _____ Fax # _____

Mailing Address (check one): Home Work _____

Email _____

Education: _____

Highest Level _____ Diploma or Degree _____ Year Received _____

School _____ City/State _____

Certifications by other organizations _____

Signature _____

Dues Payment Method (U.S. Dollars ONLY):

- Check Money Order American Express MC VISA Discover

Credit Card # _____

Expiration Date _____ (Month Year) Card Verification Code _____

Cardholder's Name _____

Category of Membership

- Regular Class** **\$75.00**
Regular Class members are persons either actively engaged in, or with an active interest in, clinical laboratory technology.
- Student Class** **\$35.00**
Student Class members are persons enrolled full or part-time in an accredited school of medical technology. In order to process your membership, a current official academic transcript verifying your studies must be forwarded to the AAB office directly from the issuing institution and must be official and contain the seal of the educational institution.
- Please send me information about the AAB Board of Registry certification categories:
MT(AAB) (medical technologist),
MLT(AAB) (laboratory technician),
POLT(AAB) (physician office laboratory technician), and **PBT(AAB)** (phlebotomy technician).

If you are currently an AAB member, please pass this application on to a colleague.

Please return completed application, along with applicable payment to: **AAB Associate Member Section, 906 Olive Street, Suite 1200, St. Louis, MO 63101-1448, telephone: (314)241-1445, fax: (314)241-1449.**