

MSS 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 laboratorians, state activities, continuing education programs, and technical information

Educational Publications, Courses

- PER Basic Laboratory Knowledge Online Course
- · PER Chemistry Review 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 # | | | | |
| 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

- □ Please send me information about the AAB Board of Registry certification categories: MT(AAB) (medical technologist), ELS(AAB) (embryology laboratory scientist), ALS(AAB) (andrology laboratory scientist), 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.