



Active Membership Application Information

If you are a plastic surgeon who is board certified or eligible to become certified by The American Board of Plastic Surgery® or The Royal College of Physicians and Surgeons of Canada®, you may be eligible to become an Active Member of the American Society of Plastic Surgeons® (ASPS).

The first step in joining the American Society of Plastic Surgeons as an **Active Member** (domestic) is to become a **Candidate for Membership**. As a Candidate you will receive ASPS educational benefits immediately upon receipt of your application and payment of your Candidate dues. The annual Candidate dues are prorated based on the month you apply.

Candidates receive the following educational benefits:

- Subscription to *Plastic and Reconstructive Surgery*® (PRS) - the number one plastic surgery journal in the world
- Subscription to *Plastic Surgery News*® (PSN), the most-read news publication in the specialty
- Access to the online *ASPS Education Network* (ASPS EdNet)
- Access to members-only resources on the ASPS website
- Discounts on ASPS products and meetings, including registration to *Plastic Surgery The Meeting*
- Eligible to present papers and participate in discussions at Plastic Surgery The Meeting
- Discounts on educational preparation services and instructional testing (In-Service)
- Opportunity to serve on some ASPS committees



A prerequisite for Active Membership is to serve one year as a Candidate and be board certified in plastic surgery. Once your completed application materials, including sponsor letters, are received and you have met all the Active Member requirements, you will be placed on the next available ballot to become an **Active Member**.

As an Active Member you will also receive the following additional benefits:

- Use of the ASPS Member Logo
- Inclusion on ASPS's *Find-a-Surgeon*
- Access to information on *PSF Grants Programs* and scholarship programs
- Opportunity to serve on ASPS and PSF Committees
- Voting privileges and more!

ASPS...Your essential partner in the practice of plastic surgery.sm

Application Process

All applicants must complete one year as a Candidate Member and achieve board certification, prior to being elevated to Active Membership. Upon completion of one year as a Candidate and submission of all application materials and sponsor letters, applicants are placed on the ASPS ballot for Active Membership.

1. Complete the attached application
2. Obtain and submit sponsor letter(s) from an Active or Life Member of ASPS or your Training Program Director
One sponsor letter is needed when applying to be a candidate. A **second** sponsor letter from someone within the same geographic areas is required in order to be placed on the ballot for Active Membership.....
3. Submit a copy of your letter of board admissibility if you are **within seven years** of satisfactorily completing your formal residency training or if **over seven years** of residency completion, submit the certificate from The American Board of Plastic Surgery® or The Royal College of Physicians and Surgeons of Canada®
4. Copy of your identification
5. Submit application fee and Candidate Dues: (U.S. Dollars)
6. Submit a CV and recent photograph.....

Submit the required materials shown above to:

ASPS Member Services

American Society of Plastic Surgeons
444 East Algonquin Road
Arlington Heights, IL 60005-4664, USA
Email: Membership@PlasticSurgery.org
FAX: 1-847-228-7099

Application Review

Once all materials have been submitted, your application will be reviewed by the Membership Committee and, if approved, your application will be submitted to the Board of Directors for voting.

Candidate Membership fees are collected upon the date of application and candidate benefits are provided immediately. *Please note, a \$150 one-time application fee will also be collected when submitting your application.* Each November, candidates will receive dues notifications for the following year. Candidate dues are dependent on year of candidacy. These dues increase each year, as follows:

First year: \$456
Second year: \$610
Third year: \$672
Fourth year: \$1,130

After completing one year of being a Candidate Member and becoming board certified, election to Active Membership shall be by a majority vote, by the ASPS Board of Directors, at which a quorum is present. Voting to elect members is held four times per year: January, March, July and October.

You will be notified of your acceptance or denial. **Active Membership fees are \$1,299 per year.** Upon acceptance of your membership, you will receive your ASPS membership certificate and all the other benefits awarded to Active Members.

If you have questions or need help with the membership process, please contact Member Services, Monday through Friday 8:30 am – 5:00 pm (CT).

Phone: 800-766-4955 or 847-228-9900 ext. 471

FAX: 1-847-228-7099

Email: Membership@PlasticSurgery.org

About the American Society of Plastic Surgeons:

ASPS's core values embody excellence in plastic surgery through education, research, intellectual exchange and promoting unity in the specialty of plastic surgery. As a vibrant society, ASPS provides its members with many educational, professional and personal benefits. Our mission is to advance the quality of care delivered to plastic surgery patients by encouraging the highest standards of training, ethics, physician practice management and research in plastic surgery.

The American Society of Plastic Surgeons (ASPS) is the largest plastic surgery specialty organization in the world. Founded in 1931, the Society is composed of more than 8,000 physician members.

The Plastic Surgery Foundation: ASPS's Charitable Organization



THE PLASTIC SURGERY
FOUNDATION™

The Plastic Surgery Foundation, the philanthropic arm of the ASPS is a world leader in research, championing initiatives that have a significant impact on clinical practice. The PSF also works to educate and cultivate the pipeline of surgeon scientists to assure that ASPS members will spearhead research and medical innovation now and for years to come.



AMERICAN SOCIETY OF
PLASTIC SURGEONS®

Active Membership Application

Promotional Code: _____ Date of Application: _____

First Name: _____ MI: _____

Last Name: _____

Suffix: _____ Gender: Male ___ Female ___ Other ___ Prefer Not to Disclose ___
(JR., Sr. III, IV)

Date of Birth: _____

Medical Degree(s): _____
(MD, PhD, FACS, Professor)

What prompted you to apply to join ASPS?

- Global Partner Webinar
- Training Program Director recommendation
- Email Invite from ASPS
- ASPS Member Referral
- Referred to by a colleague
- Achieved ABPS Certification
- Meeting or Conference
- Completed residency or fellowship
- Social Media
- Other: _____

Office Address

Office Name: _____

Street Address 1: _____

Street Address 2: _____

City: _____ State: _____ Postal Code: _____

Country: _____ Telephone: _____ Fax: _____

Practice Website Address: _____ Office Email: _____

Office Manager Name: _____ Office Manager Email: _____

Home Address

Street Address 1: _____

Street Address 2: _____

City: _____ State: _____ Postal Code: _____

Country: _____ Telephone: _____ Mobile: _____

Personal Email: _____

Plastic Surgery Training Information

Number of Years in Practice: _____

Name of Medical School: _____ City/Province: _____

Other: _____

Medical Residencies (Name of Institutions)

General Surgery: _____ Start Year: _____ End Year: _____

Plastic Surgery: _____ Start Year: _____ End Year: _____

Training Program Director: _____

Fellowship: _____ Start Mo/Yr: _____ End Mo/Yr: _____

_____ Start Mo/Yr: _____ End Mo/Yr: _____

Board Certification

Plastic Surgery: _____ Date: _____

ABPS Certification Number (If applicable): _____

Current Hospital Appointments: _____

Related Organizations and Service

Military Experience: Active _____ Reserves _____ Begin Date: _____ End Date: _____

Details: _____

Regional Plastic Surgery Society: _____

Medical Society Membership (present): AMA: _____ ACS: _____

Other Medical Society Membership: _____

Teaching Appointments (current): _____

Hospital Appointments (current): _____

Other Training, Research, Teaching, etc.: _____

Special Awards or Recognition (any field): _____

Authorization to Release Information

While an Applicant for Membership and if elected to membership in the American Society of Plastic Surgeons® (ASPS or the "Society"), I agree to abide by the Society's Bylaws and Code of Ethics. I understand that membership in ASPS is a privilege and not a right. As an applicant for membership, I have the responsibility of providing information adequate for proper evaluation of my fitness for membership in ASPS.

In furtherance of my application for membership in ASPS, I hereby request and authorize any hospital, any medical staff, any medical organization and any person who may have information (including medical records, patient records and reports of committees) that they deem relevant to my fitness for membership to provide such information to the Society. I further authorize the Society to provide any information it receives in connection with my application for membership in the Society to a state or county licensing authority, a state or county medical association, or an accrediting body provided I have authorized the licensing authority, medical association, or accrediting body to obtain such information.

The Society shall not be liable for acts performed in connection with the collection, evaluation, or dissemination of information or opinions, whether or not requested or solicited, in connection with my application for membership in the Society. I shall not demand, through any judicial process, access to any information accumulated or prepared by the Society in considering my application for membership.

I have additional information that may be necessary for a proper evaluation of my fitness for membership by the Society (previous disciplinary actions, license revocations, etc.) and I will provide the necessary documentation, upon request.

I have no additional information to provide that would affect my fitness for membership with the Society.

The ASPS Bylaws can be found at plasticsurgery.org/asps-bylaws

The ASPS Code of Ethics can be found at plasticsurgery.org/code-of-ethics

Name (Printed): _____

Signature: _____ **Date:** _____

Please submit application, materials and fee to:

ASPS Member Services
American Society of Plastic Surgeons
444 E. Algonquin Road
Arlington Heights, IL 60005-4664
Or email to: membership@plasticsurgery.org

*When an application for Active Membership is received later than seven (7) years following completion of formal training, such application shall be considered only when accompanied by verification of certification by the appropriate certifying Board.