

# TEXAS PHARMACY ASSOCIATION

## 2015 MEMBERSHIP APPLICATION



Join online @ [www.texaspharmacy.org](http://www.texaspharmacy.org)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Gender  Male  Female  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 TSBP #: \_\_\_\_\_ NABP CE ID #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

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#### MEMBERSHIP OPTIONS

(ALL FIELDS REQUIRED IN ORDER TO SUBMIT APPLICATION)

- Pharmacist **\$295**       Pharmacy Technician **\$60**       Associate (Non-Pharmacist) **\$295**  
 Retired Pharmacist **\$120**       Newly Licensed **\$120**       4<sup>th</sup> Year to Pharmacist **\$95**

#### Choose Affiliated Local Association: *(Optional)*

- |   |   |  |   |   |
|---|---|--|---|---|
| <input type="radio"/> Bexar County \$20       | <input type="radio"/> Brazos Valley \$15  | <input type="radio"/> Capital Area \$30  | <input type="radio"/> Central East Texas \$15 | <input type="radio"/> Central West Texas \$10 |
| <input type="radio"/> Coastal Bend \$20       | <input type="radio"/> Dallas Area \$30    | <input type="radio"/> Denton County \$50 | <input type="radio"/> East Texas \$10         | <input type="radio"/> El Paso \$50            |
| <input type="radio"/> Gulf Coast \$60/\$30    | <input type="radio"/> Houston Area \$30   | <input type="radio"/> Lake Houston \$60  | <input type="radio"/> North Houston \$60/\$30 | <input type="radio"/> Rio Grande Valley \$15  |
| <input type="radio"/> South Central Texas \$5 | <input type="radio"/> Tarrant County \$30 |  |   |   |

#### Choose Practice Setting: *To better serve TPA members we would like to add your primary practice setting to your member profile.*

*Practice specific interest groups may be formed around your practice area to support a network of your peers as a resource for your needs.*

- |                                      |   |  |   |   |
|--------------------------------------|---|--|---|---|
| <input type="radio"/> Academia       | <input type="radio"/> Armed Services          | <input type="radio"/> Community Chain            | <input type="radio"/> Community Government      | <input type="radio"/> Community Independent |
| <input type="radio"/> Government     | <input type="radio"/> HMO                     | <input type="radio"/> Home Health                | <input type="radio"/> Hospital                  | <input type="radio"/> Hospital-Government   |
| <input type="radio"/> Long term Care | <input type="radio"/> Mail Service            | <input type="radio"/> Manufacturer or Wholesaler | <input type="radio"/> Nuclear                   | <input type="radio"/> Pharmacy Management   |
| <input type="radio"/> Retired        | <input type="radio"/> Sterile Pharmaceuticals | <input type="radio"/> Unemployed                 | <input type="radio"/> Other (Please List) _____ |   |

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#### TOTAL DUE

TPA annual dues + optional dues for local association (if applicable)

\$ \_\_\_\_\_

#### Additional Opportunity to Support Texas Pharmacy: *(Optional)*

- Texas Pharmacy Foundation:**     \$25.00     \$50.00     \$75.00     \$100.00  
**PharmPAC:**                             \$25.00     \$50.00     \$75.00     \$100.00

#### Additional Donation:

\$ \_\_\_\_\_

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#### PAYMENT OPTIONS

##### CREDIT CARD:

Please charge my:     Visa     MasterCard     American Express

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Phone #: \_\_\_\_\_ Payment Type:     Personal     Corporate

**TAX NOTE:** Dues may be claimed as a business expense, but not as charitable deductions. A portion of your payments deductible as an ordinary and necessary business expense to the extent that TPA engages in lobbying (separate from PharmPAC). The non-deductible portion of your dues for 2014 is 28%. \$25 of your payment is allocated to PharmPAC, TPA's political action committee.

Check here if you **DO NOT WANT** any of your payment to go to PharmPAC. *(This election will not decrease payment amount.)*