



**AACA Headquarters**  
P.O. Box 2945  
LaGrange, GA 30241  
Phone: 706-298-0287  
Email: [aaca@clinical-anatomy.org](mailto:aaca@clinical-anatomy.org)

## 2021 Annual Dues Notice

Dear Colleague:

Now that we have welcomed in the New Year, it is time to send your annual dues payment to keep your membership in AACA active. Due to rising publishing costs, all AACA members eligible to receive a journal will be receiving electronic journal access unless otherwise requested. If you wish to receive the hard copy, please contact our representative from Association Services Group, Kendra Tyner, Program Services Coordinator ([ktyner@asginfo.net](mailto:ktyner@asginfo.net)) so that your preference can be placed into the appropriate hard-copy category *before* you pay your dues. Members requesting a hard copy of the journal will be charged an additional fee to cover the costs of printing the journal.

All payments to the AACA (annual dues, Annual Scientific Meeting registration, Postgraduate Course registration, etc.) are directed through the following link: <https://clinical-anatomy.starchapter.com/members.php>. Once you have located the site, your AACA I.D. is the email address you use with the Association and you should have a password already set up (click on Forgot Password if you have not already created one). If you have difficulty logging into the system, please contact Kendra Tyner ([ktyner@asginfo.net](mailto:ktyner@asginfo.net)).

There are 3 ways to submit your payment:

1. **Credit card ONLINE** through a secure server. *Visa, MasterCard, American Express, and Discover* are all accepted for your convenience.
2. **Credit card by MAIL or FAX:** Using this method you must not only include your credit card number and expiration date, but also the address to which the card's billing statement is sent (to verify the transaction if requested by the card issuer).
3. **CHECK by MAIL** (personal, institutional, etc.). Please note that if you pay by check, *all payments must be in U.S. dollars drawn on a U.S. banking institution.*
  - *Foreign checks and currencies cannot be accepted at this time due to the high processing fees associated with these funds (often over 50% of the checks value).*
  - If an institutional check is used for payment, please make certain the members name(s) appear on the check.

Once you have logged into the AACA Website, simply follow the instructions for membership renewal. If you plan to use a credit card, this can be done on the site. If you prefer an invoice, you can have one printed from the site or use the invoice that follows.

## 2021 AACA Dues - Membership Levels

### Regular Membership

\_\_\_\_\_ Electronic Journal access: \$150

\_\_\_\_\_ Hard Copy of the Journal: \$195

### Associate Membership - Electronic Journal Access

\_\_\_\_\_ Any Degree seeking Student: \$50

\_\_\_\_\_ Post doc/Resident: \$100

### Associate Membership - Hard Copy of Journal

\_\_\_\_\_ Any Degree seeking Student: \$195

\_\_\_\_\_ Post doc/Resident: \$195

### Affiliate Membership\* - No Journal provided

\_\_\_\_\_ (Members of BACA, ANZACA, ASSA)\*: \$50

### Senior Membership\*\*

\_\_\_\_\_ Electronic Journal access: \$100

\_\_\_\_\_ Hard Copy of the Journal: \$195

\_\_\_\_\_ No Journal: \$0

### Honored Membership

\_\_\_\_\_ Electronic Journal access: \$0

\_\_\_\_\_ Hard Copy of the Journal: \$195

### Other Donations:

\_\_\_\_\_ Anatomical Services Award Fund

\_\_\_\_\_ Benton Adkins Distinguished Service Award Fund

\_\_\_\_\_ Ralph Ger Student Platform Award Fund

\_\_\_\_\_ Sandy Marks Student Poster Award Fund

\_\_\_\_\_ AACA General Donation Fund

\$ \_\_\_\_\_ **TOTAL**

\* An option for BACA, ANZACA, ASSA members only, does not include a Journal subscription.

\*\* 65 yrs & older, a member of AACA for over 5 years and no longer employed full-time.

*If you have downloaded this form, you*

**MUST fill in this area:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

Country/Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Please mark the appropriate category for your Annual Dues, add any donations you wish to make, and put amount of payment in TOTAL line. Mail or Fax completed form as indicated below.

**Remittance by Credit card** other than through the web site (mail or FAX):

Credit Card **BILLING** Address: \_\_\_\_\_

\_\_\_ same as address above

NAME on Card: \_\_\_\_\_

(Card Type: Visa, Mastercard, American Express)

Credit Card # \_\_\_\_\_ CSV: \_\_\_\_\_

Exp. Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Credit card remittance by FAX to:** (706) 883-8215

**Credit card / check remittance by MAIL to:**

AACA

c/o Kendra Tyner

PO Box 2945

LaGrange, GA 30241