

AFFILIATED SOCIETIES MEMBERSHIP APPLICATION

Benefits

- **The Journal of Minimally Invasive Gynecology** — You will receive a complimentary subscription worth \$198 USD to this bi-monthly Journal (Jan/Feb - Mar/Apr - May/June - Jul/Aug - Sep/Oct - Nov/Dec). Also available to members on the AAGL web site.
 - **AAGL Video Journal** — All AAGL members are able to use their pin number to access surgical videos that were presented at the 1999-2007 Annual Meetings.
 - **Member Listing on the AAGL Web Site/Personalized Web Page** — All members of the AAGL are listed on our Web Site (www.aagl.org). Members are now able to personalize their own web page that is linked to the AAGL web site, at no additional charge.
 - **NewsScope** — AAGL's quarterly newsletter.
 - **EndoExchange™** — A lively forum to share medical and surgical tips.
 - **Career Scope** — Our online career placement program allows members to view jobs or post resumes free of charge.
- **A Primer in Gynecologic Endoscopy** — This useful Primer, authored by leading physicians, is a practical guide to minimally invasive care. With over 200 pages, it includes topics on: informed consent, organizing the OR, laparoscopic instruments, adhesion prevention, hysterectomy, infertility, sterilization, and managing complications. Available to members online or on CD.
 - **Reduced Rates to all AAGL Meetings**
 - **Reduced Rates on AAGL Publications/Videos, Books, etc.**
 - **Advanced Notification** — on all of our educational workshops, lectures, conferences, and congresses in advance of general announcement to give you the first opportunity to register. All of our events are accredited for Category 1 AMA and ACOG credits.
 - **A Certificate of Membership**
 - **Group discounts for products and services**
 - **AAGL Bulletin** — Timely information about medical developments and AAGL news.

Fees

- First Time Members \$110 USD
 Residents/Fellows in Training \$95 USD

(Please print name as it should appear on your membership certificate.)

First Name: _____ Last Name: _____ Degrees: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Country: _____ Telephone (area code): _____

Fax (area code): _____ E-mail: _____

Name of Society affiliated with the AAGL of which you are a member: _____

DEMOGRAPHICS Male Female Year of Birth _____

Type of Practice: Academic Private Hospital Residency Fellowship

 Primary Gynecology Ob/Gyn Infertility Urogyn Oncology Other _____

 Secondary Gynecology Ob/Gyn Infertility Urogyn Oncology Other _____

How Long in Practice? 1-5 years 6-10 years 11-20 years greater than 20 years

EDUCATION

MEDICAL SCHOOL

Name of Institution _____ Degree _____ Year Graduated _____

POSTGRADUATE TRAINING

Name of Institution _____ Degree _____ Year Graduated _____

BOARD CERTIFICATION:

Name of Board _____ Certification Date _____

Other Medical Societies (optional): _____

PAYMENT TYPE: U.S. Funds Only Check Visa M/C

Name on Card: _____

Credit Card #: _____ Expiration Date: _____

Signature _____ TOTAL AMOUNT ENCLOSED \$ _____

I hereby make application for membership in the AAGL Advancing Minimally Invasive Gynecology Worldwide.

Signature _____ Date _____