



Affiliate Membership Application Information

The mission of the Association for Aesthetic Surgery Pakistan is to advance the quality of care delivered to Aesthetic surgery patients by encouraging the highest standards of training, ethics, physician practice management and research in Aesthetic surgery. The Society's core values embody excellence in Aesthetic surgery through education, research, intellectual exchange and by promoting unity in the specialty of Aesthetic surgery.

Allied Health Affiliate Membership may be conferred upon non-physician health care professionals who support the Aesthetic surgery team, including but not limited to nurses, physician assistants, research assistants, residency coordinators, surgical technologist and/or assistants.

As an Allied Health Affiliate member, you will receive the following educational benefits:

- Access to members-only content at <https://aestheticsurgerypk.com>
- Digital subscription to *Aesthetic Surgery News* (ASN)
- Full access to *AASP Education Network* (AASP EdNet) for online clinical education, including the coding guide book
- CME opportunities for Physician Assistants
- Optional discounted subscription to the journal *Aesthetic and Reconstructive Surgery* (PRS)
- Reduced registration fee for *Aesthetic Surgery The Meeting* (ASTM)
- Member pricing on AASP/ products and services



Allied Health Affiliate Membership Application

☐

PKR: 20000 to cover ONE (1) year of dues

Name (Please Print): _____

Gender: Male ☐ Female ☐

Date of Birth: _____

Job Title: _____

Mailing Address

Street Address 1: _____

Street Address 2: _____

City: _____ State: _____ Postal Code: _____

Telephone Number: _____ Fax Number: _____

Society Email: _____

Personal Email: _____

AASP Member Physician: _____ AASP Member Id#: _____

Telephone Number (Employer): _____ Fax Number (Employer): _____

SIGNATURE

DATE

Please retain a copy for your records.

Submit a sponsorship letter from an active member of the Society.

Payment method will be sent after the application is submitted.

Authorization to Release Information

While an Applicant for Membership and if elected to membership in the Aesthetic Society of Aesthetic Surgeons® (AASP or the "Society"), I agree to abide by the Society's Bylaws and Code of Ethics. I understand that membership in AASP 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 AASP.

In furtherance of my application for membership in AASP, 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.

Name (Printed):

Signature: _____ **Date:** _____

☐ 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.

Please submit application and letter of sponsorship from an active member of the Society to:

AASP Member Services

Association for Aesthetic Surgery

35-H3 Johar Town Lahore

Or email to: membership@Aestheticsurgery.org