

## IASP® Dues Payment Form

Name (type or print): \_\_\_\_\_

**Regular Member** Print and online access to the journal *PAIN* is a benefit of regular membership.

**Please choose the appropriate membership dues amount based on your annual income:**

Income	Dues Amount
___ >US\$100,000	US\$230.00
___ US\$40,000 – 100,000	US\$180.00

-----  
 \_\_\_ Online Only of PAIN journal  
 \_\_\_ Online Only of Pain Clinical Updates

**Regular Members with Annual Income Below US\$40,000**

Regular Members with annual income of **less than** US\$40,000 may choose whether to receive the printed journal *PAIN*:

- \_\_\_ Annual income is less than US\$40,000: print **and** online journal access. Dues amount: US\$140.00
- \_\_\_ Annual income is less than US\$40,000: online journal access **only**. Dues amount: US\$50.00

**Trainee Member**

Applicants are eligible for trainee membership while in training. Applicants must submit the *Verification of Trainee Status* form (page 4 of this application) giving the type, place, and duration period of their training. The form must be signed by both the trainee and his/her supervisor.

- \_\_\_ I am currently in training, and I want print **and** online journal access. Dues amount: US\$140.00
- \_\_\_ I am currently in training, and I want online journal access **only**. Dues amount: US\$50.00

**Affiliate Member**

Affiliate Members receive print and online access to the journal *PAIN*.

\_\_\_ Affiliate Member US\$1,500.00 **Please send your completed Application for Membership, dues payment, and Verification of Trainee Status form (if applicable) using one of the following methods:**

**Via the Post:**

IASP Secretariat  
 1510 H. Street N.W., Suite 600  
 Washington, DC 20005-1020 USA

**Via Fax:**

+1 202-524-5301

**Via Email:**

members@iasp-pain.org

**Questions? Need help?**

If you have questions about completing and submitting the Application for Membership, including this Dues Payment Form, please call the IASP Office at +1 202-524-5300, extension 109.

For more information about IASP, visit our website:  
[www.iasp-pain.org](http://www.iasp-pain.org)

**Special Interest Groups (SIGs):** SIG enrollment is separate from membership dues. The fee is US\$20.00 for each SIG you wish to join. Information about each of our SIGs is available on the IASP website: [www.iasp-pain.org/SIGS](http://www.iasp-pain.org/SIGS)

**All amounts in US\$**

Abdominal and Pelvic Pain	US\$20.00 ___
Acute Pain	US\$20.00 ___
Cancer Pain	US\$20.00 ___
Clinical/Legal Issues in Pain	US\$20.00 ___
Clinical Trials	US\$20.00 ___
Complex Regional Pain Syndrome	US\$20.00 ___
Genetics and Pain	US\$20.00 ___
Musculoskeletal Pain	US\$20.00 ___
Neuromodulation	US\$20.00 ___
Neuropathic Pain	US\$20.00 ___
Orofacial Pain	US\$20.00 ___
Pain and Movement	US\$20.00 ___
Pain & Pain Mgmt in Non-Human Species	US\$20.00 ___
Pain Education	US\$20.00 ___
Pain in Childhood	US\$20.00 ___
Pain in Older Persons	US\$20.00 ___
Pain Related to Torture, Organized Violence, and War	US\$20.00 ___
Pain and Placebo	US\$20.00 ___
Sex, Gender, and Pain	US\$20.00 ___
Systematic Reviews in Pain Relief	US\$20.00 ___

**SIG Dues:** US\$ \_\_\_\_\_

**Membership Dues:** US\$ \_\_\_\_\_

**Total Funds Submitted:**

**US\$**

**Methods of Payment:**

**Personal Check** (US and Canadian banks); **Travelers Check**; **Money Order** (US or international); **Bank Draft** (bank fees pre-paid); **Western Union** c/o Serra Mammo

**Wire Transfer** (all bank and transfer fees paid by applicant) to:

Bank of America  
 Account Number: 29408 804  
 Routing Number: 0260-0959-3  
 SWIFT Address: BOFAUS6S

**Credit Card:** (circle one)

Visa                      MasterCard      American Express

Card No: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Exp. Date: \_\_\_\_\_ (required)

Signature: \_\_\_\_\_



International Association for the Study of Pain

**IASP**

Working together for pain relief