

ASCLS Membership Categories and Eligibility Requirements

(ASCLS membership is from the date of payment to the next July 31.)



PROFESSIONAL (*full voting privileges*) is open to all persons certified or engaged in the practice and/or education process of the clinical laboratory science, including those with an active interest in supporting the purposes and goals of this Society. Membership benefits are dependent on level of membership:

PROFESSIONAL I includes basic benefits plus the award winning journal, CLS.

PROFESSIONAL II* includes basic benefits only.

National Dues: Professional I - \$92; Professional II - \$70; **plus** State Dues: (see attached schedule)

COLLABORATIVE* (*Non-voting privileges*) is available to any individual who currently holds membership in any other *health related national organization* **AND HAS NEVER BEEN A MEMBER OF ASCLS.**

National Dues only: \$40

FIRST YEAR PROFESSIONAL* (*full voting privileges*) Open to persons who have graduated within the last twelve months from an accredited program in laboratory science. Prior student membership with ASCLS is not a prerequisite. This membership status is valid for only one year to assist recent graduates. After one year in this category, members are upgraded to Professional membership.

National Dues: \$40.00 plus State Dues

STUDENT*(*non-voting privileges*) Open to persons enrolled in a structured program of training or academic instruction in clinical laboratory science, or to full-time graduate students in related science area.

National Dues: \$25.00 plus States Dues:

*Persons residing outside the U S are not eligible for these categories--International practitioners must join as Professional I.

I wish to join ASCLS as a _____ member.

(Students, please list your expected date of graduation: _____ Mo/Yr.)

My mentor/recruiter is: Name _____ ASCLS Member No. _____

Membership dues: _____ + State dues: _____ = Total payment enclosed _____

Method of Payment: (U.S. Funds Only)

Check (payable to ASCLS) Visa MasterCard Amex

Exp. date _____ Card # _____

Name on card _____ Signature _____

STATE DUES SCHEDULE

Professional I & II		Student	
CA	\$25	CA, CT, FL, HI, IL, IN, IA, LA, MA, MS, NE, NH, NJ, NM, NY, NC, PR, RI, VA, WI	\$5
CO, NY	\$20	AL	\$4
TX	\$18	OH, OK	\$3
FL, HI, LA, MN, MO, MT, NC, NE, NJ	\$15	AZ, GA, KY, MI, NV, SC, TN, UT, WV	\$2
AL, AK, AZ, AR, CT, GA, ID, IL, IN, IA, KS, KY, MA, MI, MS, NV, NH, OH, OK, OR, PA, PR, RI, SC, SD, TN, UT, VA, WA, WI, WV, WY	\$10	STATES NOT LISTED	\$0
DC, MD	\$6	*First Year Professional (state dues schedule same as Professional I & II except for the states listed below) CA - \$0, NY - \$10, TX - \$9, CO - \$10	
DE, ME, NM, ND, VT	\$5		