Application for Senior Membership

Complete all pertinent information on the application. Sign, date, and mail, email, or fax your application to:

**American Academy of Neurology**
Member Services
201 Chicago Avenue
Minneapolis, MN 55415, USA

Email: memberservices@aan.com
Tel: (800) 879-1960 or (612) 928-6000
Fax: (612) 454-2746

**Requirements**

Senior members have no financial obligations to the AAN. Please see the Academy Membership Policy for complete guidelines. Your change to Senior Member status will go into effect during the next dues cycle, which runs January 1–December 31. No refunds will be given on dues already received. To apply for Senior status, the applicant must meet the following requirements:

1. A current member of the American Academy of Neurology with membership for five or more consecutive years following training.
2. Fully retired or less than 15 hours per week of paid professional neurology-related activity or disabled.

**Contact Information**

**Subscription Information**

Member ID ____________________________

☐ Please continue to send the Neurology® journal. I have enclosed a reduced subscription fee of $165. If you prefer, call Member Services toll-free at (800) 879-1960 or (612) 928-6000 to pay by credit card.

☐ Please discontinue my journal subscription but continue my membership to the AAN.

**Please specify the reason(s) for change in status**
(please check at least one of the following boxes):

☐ Fully retired from neurology-related professional activity

☐ Moved to part-time neurology-related professional activity ________ (hours/week)

☐ Illness/disability

☐ Other ________________________________
Payment Information

☐ Check/money order enclosed, payable in US dollars to American Academy of Neurology. (A $20 charge will be applied to checks returned for insufficient funds.)

☐ Credit Card

Upon approval of your application, we will send an email with online payment instructions. If you prefer, you can call Member Services toll-free at (800) 879-1960 or (612) 928-6000 to make a payment.

The American Academy of Neurology (AAN) is a 501(c)(6) tax-exempt organization, so the dues may be treated as a deductible business expense. The dues of international members are less than the dues of US members because international members are not assessed the estimated expenses for all US-oriented lobbying (government and third-party payer) and related activities.

I solemnly pledge myself to cooperate by all suitable means in extending and advancing the high moral, ethical, professional, and scientific principles as specified by the AAN Code of Professional Conduct, Qualifications and Guidelines for the Physician Expert Witness, and governance principles as specified by the Articles of Incorporation, Bylaws, and policies of the AAN according to, and governed by, the laws of the State of Minnesota. I understand as a member of the AAN I may be subject to discipline if my conduct conflicts with the standards and principles of the AAN as described in the AAN Disciplinary Action Policy. Disciplinary action may include public or private reprimand, suspension, or expulsion from membership in the AAN.

*Signature ___________________________________________ Date __________________________

*Required information

FOR OFFICE USE ONLY

AAN Join Date __________________________ Current Member Type _______________ Paid Through Date __________________________

Verified Hours Worked __________________________ Verified 5+ Years _______________ Date Approved __________________________