



# Association for Pathology Informatics

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## Premium Teaching Institutional Membership Application & Invoice (July 1, 2017 – June 30, 2018)

### Teaching Institution Information

Institution: \_\_\_\_\_

Department: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_, State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_ URL: \_\_\_\_\_

#### Departmental Chair Mentor-Educator

Name: \_\_\_\_\_

Degree (if any): \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

#### Mentor-Educator Member #1

Name: \_\_\_\_\_

Degree (if any): \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

#### Mentor-Educator Member #2

Name: \_\_\_\_\_

Degree (if any): \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

#### Mentor-Educator Member #3

Name: \_\_\_\_\_

Degree (if any): \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

#### Mentor-Educator Member #4

Name: \_\_\_\_\_

Degree (if any): \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

#### Mentor-Educator Member #5

Name: \_\_\_\_\_

Degree (if any): \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

**Mentor-Educator Member #6**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Mentor-Educator Member #7**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Mentor-Educator Member #8**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #1**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #2**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #3**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #4**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #5**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #6**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #7**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #8**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #9**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #10**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #11**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

**Resident/Fellow Member #12**

Name: \_\_\_\_\_  
Degree (if any): \_\_\_\_\_  
Position: \_\_\_\_\_  
Department: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Email: \_\_\_\_\_

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## Benefits and Opportunities for Teaching Institutional Members:

### A. Teaching Institution Special Recognition

- Your **Institution's Logo** on the **Association for Pathology Informatics (API) Web Page** – with hyperlink to your institutions' Web Page.

### B. Premium Category API Memberships

- **One Chair Membership** for the **Departmental Chair**
- **Eight Mentor-Educator Memberships** for Departmental Faculty
- **Twelve Resident/Fellow Memberships** (including membership certificates, suitable for framing).

### C. Discounted Pathology Informatics Meeting Registrations

- **Mentor-Educator(s) - discounted registrations** at the annual **Pathology Informatics Summit**: API Regular Registration Fee is \$800, discounted to **\$500**. **PI Summit** has emerged as the **top meeting** in the pathology informatics field.
- **Residents and Fellows – discounted registrations** at the annual **Pathology Informatics Summit**: Regular Trainee registration is \$450, discounted to **\$400**, plus \$250 registration for each trainee presenting an abstract at the **Pathology Informatics Summit**. There is no limit to the number of trainees to attend per institutional membership. (*These registration rates are intended to encourage residents and fellows to submit abstracts*).
- **"API President's Trainee's Lunch"** at annual **Pathology Informatics Summit**. Round table discussions with experts in the field of pathology informatics on current and future uses of computers in laboratory diagnostics, molecular pathology research, and education.

### D. Pathology Informatics Employment and Networking Opportunities

- Pathology Informatics positions posted on the "Members Only" API web site; free job postings for employers
- Access to API **"Members-Only" Listserv**.
- ***Special opportunities for resident networking with leading mentors and experts in the pathology informatics field.***

### E. Other benefits

- Access to API **"Members-Only" Listserv**.
- Use of API membership mailing list (**unlimited**)
- Unlimited publications, if accepted, at no charge, for ***Journal of Pathology Informatics*** (\$200 value per article)

### Renewal Dates\* (July 1 – June 30)

#### Dues for Premium Teaching Membership:

\$2000 annually (1 chair member, 8 mentor-educator members, 12 resident-fellow members)

New Member

Renewing Member

#### Payment Information

**If paying by check please complete form and mail to:**  
Association for Pathology Informatics, PO Box 90319,  
Pittsburgh, PA 15224

**Make checks payable to Association for Pathology Informatics**

**To pay by credit card, please go to:**

<http://www.pathologyinformatics.org/content/api-membership-application-and-invoice>

And complete the online membership application and payment through PayPal checkout.

[www.pathologyinformatics.org](http://www.pathologyinformatics.org)