

2020 NURSE & ALLIED HEALTH PROFESSIONAL MEMBERSHIP

Join AGA and invest in your future.

Stay up to date

Stay up to date with the latest GI news and research.

- **Clinical Gastroenterology and Hepatology (CGH):** (Discount for members) Official monthly clinical practice journal of the AGA Institute.
- **Gastroenterology:** (Discount for members) Leading monthly journal in the field of GI.
- **GI & Hepatology News:** Official newspaper of the AGA Institute providing commentary about clinical developments and the impact of health care policy.
- **AGA eDigest:** Weekly e-newsletter covering important topics and news from the AGA Institute.
- **AGA Perspectives:** Bimonthly magazine where experts debate today's most controversial GI topics.
- **AGA Today in Medicine:** Daily news feed featuring the day's top headlines.
- **www.gastro.org:** Access members-only resources and stay connected all day, every day.

Connect and engage

Connect and engage with colleagues who share your passions and face similar challenges.

- **AGA Community:** A private, members-only forum, directory and resource library.
- **Section affiliations:** Thirteen special interest groups. AGA members can join up to six.
- **Social media:** Interact with AGA through a variety of social networks.
- **GiCareerSearch.com:** AGA Institute's premier online career center to fill or find a position.

Thrive

Thrive in the new world of accountable care.

- **The GI Patient Center:** A collection of patient education materials.
- **AGA's Practice Updates:** Guidance to help you provide the most up-to-date, evidence-based care for your patients.
- **Clinical guidelines:** Evidence-based recommendations that help guide clinical practice decisions. Available as a mobile app.
- **Ask AGA: IBD:** and its free patient app companion, **My IBD Manager** from AGA: for everything about inflammatory bowel disease (IBD).

Improve your skill set

Improve your skill set with access to a variety of educational opportunities offered free or at a discount.

- **Digestive Disease Week® (DDW):** The world's largest gathering of GI professionals and one of the top 50 medical meetings.
- **AGA Postgraduate Course:** AGA Institute's flagship educational course covering both basic science and clinical topics.
- **DDSEP®:** A diverse learning platform that allows you to prepare for the GI board exam, assess your knowledge and keep current on GI advances.
- **And much more.** Visit AGA University at www.gastro.org/education for all programs and products.

Eligibility requirements and dues

Membership is open to persons residing in North America who have demonstrated a continued interest in gastroenterology with appropriate qualifications, certification or credentials and who would not be eligible for any other category of membership. Note: If you are a nurse practitioner or physician assistant, information on applying for AGA membership is available online at www.gastro.org/membership.

One-time application fee: \$40 / Annual dues: \$175

Optional benefits

Clinical Gastroenterology and Hepatology: \$49/year (nonmember: \$431)

Gastroenterology: \$189/year (nonmember: \$769)

Questions?

Contact AGA Member Relations at 301-941-2651 or send an email to member@gastro.org.

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Application fee (payable with application) \$40 2020 Dues \$175/year

Date ____/____/____

Optional benefit Add *Clinical Gastroenterology and Hepatology* (\$49/year)

(MM/DD/YYYY)

Add *Gastroenterology* (\$189/year)

Personal information

First name _____ Middle name _____ Last name _____

Suffix _____ Job title _____

Current degree(s): LPN RN MS MSN BA BS BSN RD PharmD Other _____ Preferred mailing address: Home Work

Company name _____

Work address _____

City _____ State/Prov _____ Zip/Postal code _____ Country _____

Work phone _____ Email address (required for website login) _____

Home address _____

City _____ State/Prov _____ Zip/Postal code _____ Country _____

Home phone _____ Alternate email address _____

Education (required)

College _____ Degree type _____ Date graduated (MM/DD/YYYY) _____

Medical (or other professional) school _____ Degree type _____ Date graduated (MM/DD/YYYY) _____

Medical license # (required if applicable) _____ State of license _____ Occupation/field of license _____

National provider identifier (NPI) (if applicable) _____

Demographics

Are of Hispanic or Latino background: Yes No Prefer not to respond

Race (Mark all that apply): Black/African American American Indian/Alaskan Native Asian Sex: Male Female

Native Hawaiian/Pacific Islander White Prefer not to respond **Date of birth** (required): ____/____/____

(MM/DD/YYYY)

Contact permissions (required)

Yes No I want to stay up to date on educational offerings, conferences, and gastroenterology updates via email or post. You can opt-out at any time.

Yes No I consent to have my data shared with select AGA partners and third parties. You can opt-out at any time.

Terms and conditions (required)

Yes I have read and agree to the AGA Privacy Policy (www.gastro.org/privacy-policy).

AGA values your personal information and has processes in place to keep your details secure. Any parties that we may share your data with are obliged to do the same and will only use it to fulfill relevant services they provide you on our behalf.

Applicant's signature (required)

I authorize AGA to obtain information from societies, hospital staff, members and any other source regarding this application and my qualifications for membership. This information, whether or not solicited by AGA, may be kept confidential by AGA. I certify that the above information is accurate.

Signature _____ Please print name _____

Payment

Membership period is Jan. 1–Dec. 31. Annual dues will be **prorated** based on acceptance date. You can find the proration chart at www.gastro.org. **Payment of the application fee and current dues must be provided at time of submission. New members will not be activated without full payment.**

My check is enclosed in U.S. dollars, payable to AGA.

Check #	Check amount
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Visa MasterCard American Express

Name on card	Card number	CVV
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Expiration date	Amount	Signature
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Submit your application by mail or online

By mail:

AGA Member Relations Department
4930 Del Ray Ave.
Bethesda, MD 20814-2513

Email:

member@gastro.org

Online:

www.gastro.org/sign-up

2020 Nurse & Allied Health Professional Membership

Save paper, join online: www.gastro.org/sign-up