



# Join the American College of Cardiology as an International Associate

[for physicians outside of the U.S. and Canada]

**Benefit from the College's prestige, latest science, scholarly publications, high-quality educational programs and colleagues who support the best in cardiovascular science and practice.**

## Benefits

- The *Journal of the American College of Cardiology (JACC)*, *JACC: Cardiovascular Interventions*, *JACC: Cardiovascular Imaging*. Option for hardcopy *JACC* is also available.
- *CardioSource.org*: access the ACC's premier online cardiovascular clinical resource, including networking opportunities within an interactive online community just for international members
- International Center online and International e-Newsletter, filled with news and information relevant to you
- Registration discounts for the ACC Annual Scientific Session and educational programs
- Reduced membership rates for Self-Assessment and *Meeting on Demand*<sup>TM</sup> Programs
- Listing in the ACC Membership Directory and option to list in the *Find A Cardiologist* public directory

## Criteria for International Associate Membership

- The candidate has completed medical professional education and training that is customary and recognized in the country
- The candidate has relevant licensure or certification for medical practice in the country, OR has an academic or research appointment at a recognized institution
- The candidate has current membership in a recognized medical society in the country, OR presents one letter of sponsorship from any physician member of the ACC

***[www.CardioSource.org/International](http://www.CardioSource.org/International)***

# ACC International Associate Application

**Complete the form then email post, or fax to:**  
American College of Cardiology, Member Services Department  
2400 N Street, NW, Washington, D.C. 20037 USA  
Email: [mdavis@acc.org](mailto:mdavis@acc.org)/Fax: (202) 375-6842  
Tel: (202) 375-6000 ext. 5603

## PERSONAL DATA (All sections must be completed)

Full Name (First) (Middle Initial) (Last)

Birthdate (Month/Day/Year)  Male  Female

Preferred Address

City, Province/State Country Postal Code

Office Telephone Home Telephone Fax Email

## EDUCATION AND TRAINING (Complete all that apply)

	Name of institution	Location (city/country)	Graduation Date	Degree
College or University				
Medical School				
Training Program				

## MEDICAL PRACTICE OR ACADEMIC APPOINTMENT (Check and complete one option)

Licensed or certified to practice medicine **OR**  Academic or research appointment

Name of authorizing body

Name of institution

## MEDICAL SOCIETY MEMBERSHIP OR ACC MEMBER SPONSOR (Check and complete one option)

Member of recognized medical society **OR**  Attach ACC physician member sponsor letter

Name of society

Name of sponsor

Address

Address

## MEMBERSHIP APPLICATION FEE AND DUES PAYMENT

Please enclose **US \$125** to apply. (Includes \$25 application fee, \$100 one year's annual dues and online JACC)

- Check here if you would like to add hardcopy JACC for US\$155. Your total fee will be **US\$280**  
 **Check or money order enclosed.** In U.S. dollars payable through a U.S. bank.  MasterCard  VISA  American Express  Discover

Cardholder Name

Card Number Expiration Date CSC #