



Transmittal Report

Instructions for Processing and Submitting Student Enrollment Forms

1. Review Forms (Please Make Copies for Your Records)

Forms that are submitted without the required information will not be processed. The required information needed for processing is:

- Required Graduation Year *(Forms without Grad Years will NOT be processed and will be sent back to the Chapter)*
- Membership Option (Single Year Member or Transitioning Member)
- Mailing Address
- Email Address *(REQUIRED: Forms must include School and/or Personal Email Address)*
- This form should only be submitted if your chapter is sending in membership enrollment forms with a check payment by mail; or if your chapter submitted a file upload and is sending in a check by mail.

2. Payment

- Submit checks for APhA Association Dues with each Membership Enrollment Transmittal Report; separate NEW/REINSTATED members from Renewing members. The total checks combined must equal the total number of student member enrollments multiplied by the •• Association Dues. IMPORTANT: APhA will refund chapter dues via electronic funds transfer to those schools that have provided banking information. Chapters that have not provided banking information will receive the chapter dues via hard copy check 5 times per year. Once after Spring Drive processing and 4 times during the Fall/Winter* *(Please Check Chapter Resources Page for Specific Dates)*. For Chapters that have not opted out of the State Dues Direct Program, APhA will submit payment along with a roster of the students directly to the State Association for those States Associations that participate.
- Credit Cards-ALL Students can join or renew online at www.pharmacist.com. (VISA, American Express, MasterCard, and Discover)

Payment Information

Regular Membership Year: November 1, 2020 to October 21, 2021
Transitioning Membership Year: November 1, 2020 to October 31, 2022

Name of person submitting this report (PLEASE PRINT): Phone: Email Address:

Campus:

Checks	Members	Dues	Chapter Dues	State Dues	Totals
NEW/REINSTATED					
Transitioning Member*	_____	x \$120	+ _____	+ _____	= \$ _____
OTHER STUDENT MEMBERS	_____	x \$45	+ _____	+ _____	= \$ _____
Credit Card					
NEW/REINSTATED					
Transitioning Member*	_____	x \$120	+ _____	+ _____	= \$ _____
OTHER STUDENT MEMBERS	_____	x \$45	+ _____	+ _____	= \$ _____
Total Members	_____				Total Dues _____

*All students graduating in 2021 only have the option of Transitioning Membership.

Send forms and payments to:
American Pharmacists
Association

PO Box 931411
Atlanta, GA 31193-1411

..... **IMPORTANT: APhA recommends mailing transmittal reports, enrollment forms, and payments using a traceable method. APhA is not responsible for submissions that are not received. You may include more than one batch in an envelope. APhA Members Services will send you an updated roster after the membership campaign has concluded. Please review for any discrepancies**

..... **Questions? Contact APhA Members Services at 800.237.APhA (2742) or at Infocenter@aphanet.org**