



student pharmacist membership application

On behalf of the California Pharmacists Association (CPhA), welcome to the profession! This is an exciting time in pharmacy and there is no better way to prepare than with a professional membership in CPhA. Membership in CPhA is an investment in yourself.

PERSONAL INFORMATION

First _____ M.I. _____ Last _____ M F

PharmD RPh PhD JD MBA MPH BS Other _____

Personal/Permanent Email _____ License/ Intern # _____

PERMANENT ADDRESS

Street _____ City _____ State _____ Zip _____

Phone (_____) _____ Cell Home

OTHER INFORMATION

Pharmacy School _____

Graduation Year _____ Degree(s) _____

Recruited by _____

DUES (All new memberships include dues for your CPhA Local Association and one Special Interest Group)

Student Pharmacist Membership: \$50 (Assigned to Academy of Student Pharmacists included)

Student membership dues include a \$20 CPh-PAC contribution.

I prefer my political support money to be deposited in the Pharmacy Defense Fund.

SPECIAL INTEREST GROUP (SIG) MEMBERSHIP

- Compounding SIG
- Community Pharmacy SIG
- Ambulatory Care SIG
- Long Term Care SIG
- Managed Care SIG
- Inpatient Care SIG
- Pharmacy Ownership SIG
- Pharmacy Technician SIG

Total: \$50

PAYMENT OPTIONS

Visa Mastercard AmEx Discover Check # _____

Card Number _____

Expiration Date _____ Security Code _____

Name on Card _____

Billing Address _____

City _____ State _____ Zip _____

Signature _____

calculate the savings

For \$50*, here is what you receive:

- \$40 discount for Western Pharmacy Exchange Conference
- \$30 discount for Rx Boot Camp
- \$130 discount for each of CPhA's certificate training programs
- Discounts to Mercer Insurance products
- \$10,000+ savings via CPhA's student loan refinancing benefit
- Career connections from a variety of practice settings
- Membership at the chapter level

...plus so much more!

*Student pharmacist membership dues

SEND APPLICATION TO:

California Pharmacists Association
4030 Lennane Dr., Sacramento, CA 95834
Email: membership@cpha.com
Fax: (916) 779-1401

*Per calendar year, initial PAC contributions up to \$200 will go to the CPh-PAC Small Contributor Committee (FFPD ID#); total contributions in excess of \$200 will go to the CPh-PAC Independent Expenditure Committee (FFPC ID#).