

## Mid-Atlantic College of Clinical Pharmacy

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### Membership Application

Membership Term: January 1, 2017 - December 31, 2017

**PLEASE COMPLETE AND RETURN VIA MAIL.**

Date \_\_\_\_\_

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

Credentials: \_\_\_\_\_

Company/Institution: \_\_\_\_\_

Position/Title: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

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

Check here if this is a renewal membership.

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*NOTE: Membership to ACCP is not required for membership to MACCP or any of its chapters.*

### 2017 MACCP Membership Dues: \$35

Application Option 1: Email completed application  
Submission ([maccp.chapter@gmail.com](mailto:maccp.chapter@gmail.com)) and pay by PayPal  
Option 2: Mail check and completed application to address  
below  
Please make checks payable to: **MACCP**

**Mail to:** Nicole Schroeder  
600 S. 43<sup>rd</sup> Street  
Philadelphia, PA 19143



You can now securely pay your 2017 MACCP Membership Dues online via PayPal from the "Info" tab on our web site at <http://maccp.echapters.com>. Or, copy this link into your browser:

[https://www.paypal.com/us/cgi-bin/webscr?cmd=\\_flow&SESSION=gLOXajMRXzQdczsGqElxucYVeZlZOSXrgJd5rpO0VDIkvuJ-wrC6jy5H-Rm&dispatch=50a222a57771920b6a3d7b606239e4d529b525e0b7e69bf0224adecfb0124e9b61f737ba21b08198d8562aa8a3da7ac30bbfba73b3e80dcc](https://www.paypal.com/us/cgi-bin/webscr?cmd=_flow&SESSION=gLOXajMRXzQdczsGqElxucYVeZlZOSXrgJd5rpO0VDIkvuJ-wrC6jy5H-Rm&dispatch=50a222a57771920b6a3d7b606239e4d529b525e0b7e69bf0224adecfb0124e9b61f737ba21b08198d8562aa8a3da7ac30bbfba73b3e80dcc)

Please email us your completed membership form after your payment.

Note: PayPal charges a small transaction fee which is added to the membership dues.