



**2024 Membership Year**  
**January 1, 2024 - December 31, 2024**  
 Forms received on or after September 15 will  
 include the remainder of current year

Join or renew your membership now online at [www.ncapa.org](http://www.ncapa.org)

**Member Information and Preferences**

Name \_\_\_\_\_ Degree/Designation \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_ DOB \_\_\_\_\_

Specialty \_\_\_\_\_ Employer \_\_\_\_\_

**By checking this box, I attest that my professional license has not been revoked**

Please check the box **if you agree** with the following statement(s)

- I would like more information on Advocating for the PA profession in North Carolina
- I am willing to be job shadowed by individuals interested in the PA profession.
- I am available for Clinical Rotations and my name can be shared with interested PA educational programs

**Choose a Membership Option** *(See the back of this form for descriptions of the membership options.):*

**Fellow** AAPA Member ID # required: \_\_\_\_\_  **Associate**  **Affiliate**

**Choose dues rate:**  **\$175** (1 Year)  **\$300** (2 Years)  **\$425** (3 Years)

**Credit Card Information** *(Credit card payment cannot be accepted if the information below is incomplete.)*

Visa  MasterCard  American Express  Discover

Credit Card # \_\_\_\_\_ Expiration \_\_\_\_\_

CSV (3-digits on back) \_\_\_\_\_ Name on Card \_\_\_\_\_

Billing Address \_\_\_\_\_

Signature of Cardholder \_\_\_\_\_

**MAIL** this form with credit card information or a check payable to:  
 NCAPA, 1121 Slater Rd, Durham, NC 27703

## Membership Options

- **Fellow Member.** A Fellow Member is a physician assistant who is a graduate of a PA program accredited by ARC-PA or a predecessor or successor agency, or is NCCPA-certified. A Fellow Member must be employed or licensed in North Carolina as a physician assistant. A Fellow Member must be a fellow of the AAPA. A Fellow Member will have the right to vote on all matters on which members of the Academy are entitled by NCAPA Bylaws or by law to vote. *Because this membership type requires AAPA membership, you must include your AAPA membership number on the front of this form. If an AAPA membership number is not included you will automatically be entered as an Associate member.*
- **Associate Member.** An Associate Member is a graduate of a PA program accredited by ARC-PA or a predecessor or successor agency, or is NCCPA-certified, and who is licensed to practice in North Carolina. An Associate member meets all the criteria of a Fellow member but elects not to become a fellow member in the AAPA. An Associate Member will have all the rights and privileges of a Fellow Member except that the Associate Member may not serve as an NCAPA Executive Committee member or delegate to the AAPA House of Delegates and may not vote on AAPA matters.
- **Affiliate Member.** An Affiliate Member is a graduate of a PA program accredited by ARC-PA or a predecessor or successor agency, or NCCPA-certified who **does not** live or work in NC **or** someone who is not a PA (such as an NP, physician, or pharmaceutical liaison) who wishes to associate with the Academy. Affiliate Members will be entitled to the privileges of the floor but will not be entitled to vote or hold office.

### Minimum Standard for NCAPA Membership

***Any individual who currently has his or her health care professional license, certificate, registration, or temporary permit revoked as a result of a final adjudicated disciplinary action for violation of their respective professional practice statutes or regulations shall be ineligible to apply for NCAPA membership during the period of that revocation.***

### Contact Information and Preferences

- **Clinical Rotation Availability.** A clinical rotation is a 4-8 week hands-on clinical experience in patient treatment and evaluation. By checking this box you are granting the NCAPA permission to forward your contact information to all North Carolina PA Programs as a possible Clinical Rotation option for PA students.
- **Job Shadowing Availability.** A job shadowing experience is a 1-2 day opportunity for a pre-PA student to spend time with a practicing PA to get an idea of "the daily routine." By checking this box you are granting the NCAPA permission to share your contact information with individuals looking for potential job shadowing opportunities.

***NCAPA membership dues are not deductible as a charitable contribution for federal tax purposes, but may be deductible as a business expense. NCAPA estimates 20% of your dues are not deductible because of NCAPA's lobbying activities on behalf of its members.***

For more information, contact:

[caroline.purdy@ncapa.org](mailto:caroline.purdy@ncapa.org) or Phone 919.479.1995, x 407

**► PROMOTE THE PROFESSION BY DONATING TO THE NCAPA ENDOWMENT ◀**

*(Please see the NCAPA Endowment section of [www.ncapa.org](http://www.ncapa.org) for more information)*