

Some Benefits of Membership

1

Affiliation with a Premium Brand

FSHP is one of the largest affiliates of the American Society of Health-System Pharmacists (ASHP).

2

Advocacy

When over 3,000 FSHP members speak as "one voice" advocating on an issue in Florida, people listen.

3

High-Quality Education

Board approved provider of pharmacy continuing education, including regional live events & online learning.

and **MORE!**

Leadership & Involvement

Professional growth doesn't stop with C.E. Taking on leadership roles within your profession are key to your professional growth.

For everyone, from students and technicians to Directors, FSHP offers many opportunities for you to get involved locally, state-wide, and even nation-wide!

Learn more & join online at

FSHP.org



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fsHP@fsHP.org | www.fsHP.org

 **FSHP**



Our Mission

The **Florida Society of Health-System Pharmacists (FSHP)** is the professional association of pharmacy practitioners that promotes and supports the continual improvement of pharmaceutical care and the profession of pharmacy as an essential component for the delivery of health care.

Place
Postage
Here

Membership Categories

ACTIVE – Registered pharmacists, in good professional standing.

JOINT – Active Membership for Registered pharmacists who are married receive a joint dues rate.

NEW PRACTITIONER – For newly graduated pharmacists. **Must join by July 1st**, 6-month membership, expires in January.

RESIDENT / FELLOW – For registered pharmacists in a pharmacy residency or fellowship program.

GRADUATE STUDENT – For registered pharmacists enrolled in a full-time professional or graduate degree program.

ASSOCIATE – For members who by their work in the health services, pharmacy instructors or otherwise are contributing to health-system pharmacy. Associate members are not eligible to vote or to hold elected office.

RETIRED (Pharmacist & Technician) - Active or Pharmacy Technician Members who have been active in the society and have retired will be eligible to qualify and apply for retired membership if they meet the following criteria: Are age 65 or older and who are retired from full time or part time employment as a pharmacist or pharmacy technician.

TECHNICIAN – Technicians (registered or certified) practicing in the State of Florida.

STUDENT PHARMACY TECHNICIAN – Individuals enrolled in a Florida Board of Pharmacy approved pharmacy technician training program are eligible for a one-year renewable membership, for up to two years.

STUDENT – Any **unlicensed** graduate or undergraduate. Students must be enrolled in an accredited school of pharmacy in the US. Students do not receive CE.



Membership Application

Bold fields are required

Membership Category (Select One)

- Active (RPh): **\$186** (includes Auto-renew)
- Joint (Spouse/Spouse): **\$305**
- New Practitioner (6 mo.): **Complimentary**
- Resident/Fellow: **\$63**
- Graduate Student: **\$63**
- Associate: **\$186**
- Retired (RPh): **\$95**
- Retired (Tech): **\$25.50**
- Pharmacy Tech: **\$51** (includes Auto-renew)
- Student Pharmacy Tech: **\$10**
- Student (Unlicensed): **\$10**

Regional Society (Select One)

- Capital (Tallahassee)
- Central Florida (Orlando)
- North Central (Gainesville/Lake City)
- Northeast (Jacksonville/St. Augustine)
- Palm Beach (West Palm Beach/Jupiter)
- Suncoast (Sarasota/Bradenton)
- South Florida (Miami)
- Southeast (Fort Lauderdale/Broward)
- Southern Gulf (Fort Myers/Cape Coral)
- Southwest (Tampa/St. Petersburg)
- Treasure Coast (Vero Beach/Port St. Lucie)

Method of Payment (Select One)

- Check / Money Order
- Visa
- MasterCard
- American Express
- Discover

TOTAL PAYMENT: _____

Card / Check # _____

Expiration Date: _____ **CVV Code:** _____

Signature: _____

Select one:

New Member Renewal Info Update

Full Name: _____

E-mail address: _____

Daytime Phone: _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Job Title: _____

Place of Employment: _____

Required for C.E. credits

RPh FL Lic # _____

Consultant Lic. # _____

Registered Pharmacy Tech # _____

NABP ID: _____

Month and Date of Birthday (MM/DD): _____

Pharmacy Students & Student Technicians

School/Institution Attending: _____

Degree: _____ Year of Completion: _____

For Student Pharmacy Technicians & Residents

Director/Instructor Name: _____

Contact Number: _____

Other Information

Are you an ASHP member? Yes No

Recruited By: _____

Notice: Dues paid to Florida Society of Health-System Pharmacists, Inc. (FSHP), classified as a 501(c)(6) not-for-profit- organization, are not deductible as charitable contributions for federal income tax purposes. However, they may be deductible under other provisions of the Internal Revenue Code (such as ordinary and necessary business expenses) subject to restrictions imposed as a result of lobbying activities. In those situations where dues may be deductible, FSHP estimates that the nondeductible portion of your dues is 20%. If you have further questions, we recommend that you consult with your tax advisor. Membership years begin in January and July. Your membership will be processed to the nearest cycle.