



Application for New AMSPAR Membership

2021/2022

Personal Details

Title [] Mr [] Mrs [] Ms [] Miss [] Other

Surname

Forename

Home Address

Town

County

Post Code

Primary Telephone

D.O.B [] [] [] [] [] [] [] [] [] [] [] []

Contact email address

Work Details

Name of Workplace

Work Address

Town

County

Post Code

Work Telephone

Extension

Job title

How long have you worked in health? [] [] years [] [] Months

If you have an AMSPAR qualification, please indicate below or for APL enter other relevant qualifications?

- [] Practice Management / DPCHM [] Medical Secretarial / ADMS [] Medical Receptionist / IDMR
[] Cert / Dip in Medical Admin - Level 2 [] Cert in Medical Admin / Dip in Medical Secretaries - Level 3
[] Medical Terminology Level 2 [] Medical Terminology Level 3 [] Other
[] AMSPAR approved course

Where did you study for this qualification? (college/centre name)

When did you qualify? [] [] month [] [] [] [] year



AMSPAR wishes to encourage suitably qualified people to apply for membership. The Disability Discrimination Act 1995 defines disability as “a physical or mental impairment which has a substantial and long-term adverse effect on the ability to carry out normal day to day activities”. Based on this definition, do you consider yourself to have a disability? Yes No

By completing all sections and signing the application form I agree to **AMSPAR** holding the above information solely for the purposes of administering my membership as outlined in our privacy policy (see www.amspar.com)

Category of Membership

Memberships are renewed on 1st April. If you join after the 1st October, the reduced rate is applicable for your first year. **AMSPAR** student members will qualify for FREE full membership at the appropriate level until the next renewal date. **Thereafter full membership fees are payable.**

General Membership	Post Nominal	1 st April (full)	1 st October (reduced)
Affiliate	AMS (aff)	<input type="checkbox"/> FREE £0	<input type="checkbox"/> FREE £0
Associate > 5 years experience	AAMS	<input type="checkbox"/> £55	<input type="checkbox"/> £25
Member > 10 years experience	MAMS	<input type="checkbox"/> £65	<input type="checkbox"/> £35
Fellow > 15 years experience	FAMS	<input type="checkbox"/> £70	<input type="checkbox"/> £40
General Membership (with faculty)			
Affiliate (associate) - Primary	AMS (aff) AIPC	<input type="checkbox"/> £100	<input type="checkbox"/> £50
Affiliate (associate) - Secondary	AMS (aff) AISC	<input type="checkbox"/> £100	<input type="checkbox"/> £50
Affiliate (Fellow) - Primary	AMS (aff) FIPC	£135 <input type="checkbox"/>	£80 <input type="checkbox"/>
Affiliate (Fellow) - Secondary	AMS (aff) FISC	£135 <input type="checkbox"/>	£80 <input type="checkbox"/>
Associate - Primary	AAMS AIPC	£85 <input type="checkbox"/>	£40 <input type="checkbox"/>
Associate - Secondary	AAMS AISC	£85 <input type="checkbox"/>	£40 <input type="checkbox"/>
Member - Primary	MAMS AIPC	£95 <input type="checkbox"/>	£45 <input type="checkbox"/>
Member - Secondary	MAMS AISC	£95 <input type="checkbox"/>	£45 <input type="checkbox"/>
Fellow - Primary	FAMS FIPC	£120 <input type="checkbox"/>	£55 <input type="checkbox"/>
Fellow - Secondary	FAMS FISC	£120 <input type="checkbox"/>	£55 <input type="checkbox"/>
Certified Membership *			
Choose your FREE faculty		IPC <input type="checkbox"/>	ISC <input type="checkbox"/>
*Add AIPC or FIPC, or AISC or FISC to the post nominal shown below;			
Certified Practice Administrator	CPAdm MAMS	£70 <input type="checkbox"/>	£30 <input type="checkbox"/>
Certified Practice Administrator	CPAdm FAMS	£75 <input type="checkbox"/>	£35 <input type="checkbox"/>
Certified Health Administrator	CHAdm MAMS	£70 <input type="checkbox"/>	£30 <input type="checkbox"/>
Certified Health Administrator	CHAdm FAMS	£75 <input type="checkbox"/>	£35 <input type="checkbox"/>
Certified Practice Manager	CPMgr MAMS	£75 <input type="checkbox"/>	£35 <input type="checkbox"/>
Certified Practice Manager	CPMgr FAMS	£80 <input type="checkbox"/>	£40 <input type="checkbox"/>
Certified Health Manager	CHMgr MAMS	£75 <input type="checkbox"/>	£35 <input type="checkbox"/>
Certified Health Manager	CHMgr FAMS	£80 <input type="checkbox"/>	£40 <input type="checkbox"/>
Certified Strategic Manager	CSMgr MAMS	£80 <input type="checkbox"/>	£40 <input type="checkbox"/>
Certified Strategic Manager	CSMgr FAMS	£85 <input type="checkbox"/>	£45 <input type="checkbox"/>

If you are an existing **AMSPAR** student and have recently completed your course please tick your membership level and this box Free membership until next renewal date FREE £0



Payment Options

Payment Details via electronic transfer, payment should be made to: **AMSPAR**
Natwest Sort Code **50-30-25** Account No: **12762989** Ref: **Surname + NEW**

Declaration

I hereby apply for membership of **AMSPAR**, and agree to abide by the Articles and Bye-Laws¹ of the Association for the time being in force. I agree to abide by the current code of conduct. I enclose a cheque or postal order made payable to **AMSPAR** for the correct amount. I understand that the information requested here will be used by **AMSPAR** exclusively and not passed on to any third parties. If I have an **AMSPAR** qualification, I have enclosed a copy of the relevant Diploma / Certificate(s) or, if I do not have an **AMSPAR** qualification, I have enclosed a copy of my APL qualifications and CV.

Signature _____ Date _____ / ____ / ____

Your completed application form and payment should now be sent to:

AMSPAR, Tavistock House North, Tavistock Square, London WC1H 9LN.
(The application process can take up to 28 working days.)

Alternatively, you can send your completed application and attachments to;

Info@amspar.co.uk

(The application process is normally completed within 7 days)

Please complete the relevant form on our website to notify us that you have made an application

THANK YOU