

DON'T LOSE ACCESS TO YOUR VALUABLE MEMBER BENEFITS!

2027 MEMBERSHIP RENEWAL/APPLICATION

JANUARY 1 – DECEMBER 31, 2027



Please complete this application form and submit with payment to ASHT.
You may also join ASHT or renew your membership online at <http://www.asht.org/join/>

CONTACT INFORMATION

Name _____

Credentials _____

Preferred Email _____

☐ New Member ☐ Current Member ☐ Previous Member

Member ID (if known) _____

New? How did you hear about us? _____

PLEASE CHECK YOUR PREFERRED MAILING ADDRESS

☐ Work

Business Name _____

Street Address _____

City _____ State _____ ZIP _____

Country _____

Phone _____ Fax _____

Email _____

☐ Home

Street Address _____

City _____ State _____ ZIP _____

Country _____

Phone _____ Fax _____

Email _____

NOTE: Your work address will automatically be listed in ASHT's *Locate a Member Therapist* directory.

☐ I do not wish to be listed in ASHT's *Locate a Member Therapist* directory.

*Please note that a portion of your annual dues for membership is for a one-year subscription to the *Journal of Hand Therapy*. ASHT dues payments are not tax deductible as charitable contributions for income tax purposes but may be deductible as a business expense. For more information, please consult your tax advisor.

PAYMENT

PROFESSIONAL MEMBERSHIP DUES

Choose Member Type (details on reverse side)

- | | |
|--|--|
| ☐ Active (Current CHT) \$275 | ☐ Associate \$275 |
| ☐ New CHT* \$225 | ☐ Associate - Step Up* \$215 |
| ☐ Affiliate \$225 | ☐ Fellow* \$80 |
| ☐ Student* \$60 | ☐ Retired* \$90 |
| ☐ Student New Member* \$30 | ☐ Multiyear Member (Two Years) \$510 |
| ☐ Leave of Absence* \$90 | |

*Verification required

If Affiliate, please specify: _____

☐ Group Membership

- ☐ Tier 1 – Minimum 3 members at 7% total discount
- ☐ Tier 2 – 4-9 members at 10% total discount
- ☐ Tier 3 – 10-19 members at 15% total discount
- ☐ Tier 4 – 20+ members at 20% total discount

WEBINAR BUNDLING

Webinar Bundling Options:

- ☐ **8 paid webinars** (plus two free webinars): \$238 (15% savings) \$ _____
- ☐ **4 paid webinars** (plus two free webinars): \$119 (15% savings) \$ _____

Subscribe to *ASSH Journal of Hand Surgery*

ASHT members receive almost 50% off list price.

☐ \$150/year (12 issues) \$ _____

PLEASE CONSIDER A DONATION TO SUPPORT ASHT:

Vision Fund

Support ASHT's strategic initiatives in advocacy, education and research

☐ \$50 ☐ \$100 ☐ \$200 ☐ Other \$ _____

Awards & Scholarships Fund

Dedicated to promoting or recognizing professional development

☐ \$50 ☐ \$100 ☐ \$200 ☐ Other \$ _____

Annual Meeting Sessions Fund

Help ASHT continue the quality programs hand therapists need

☐ \$50 ☐ \$100 ☐ \$200 ☐ Other \$ _____

TOTAL PAYMENT \$ _____

☐ VISA ☐ MasterCard ☐ American Express

Account #: _____

Expiration Date: _____ CW: _____

Card Holder's Name: _____

ZIP Code of Billing Address: _____

Signature: _____

☐ Check enclosed

Please make checks payable to ASHT. Mailing address on reverse.

PLEASE HELP US BETTER UNDERSTAND AND ANTICIPATE YOUR NEEDS

The information collected will be used for demographic purposes only.

Practice Setting

- ☐ Academic
- ☐ Hospital
- ☐ Outpatient Clinic
- ☐ Rehabilitation Center
- ☐ Research
- ☐ Not currently practicing
- ☐ Another option not listed (please specify)

Special Interests

- ☐ Academia/Research
- ☐ Dry Needling
- ☐ Ergonomics/Work Conditioning
- ☐ Lymphedema
- ☐ Neuro
- ☐ Pediatrics
- ☐ Performing Arts
- ☐ Prosthetics
- ☐ Rural-Solo Practitioners
- ☐ Sports Injuries/ Athletes
- ☐ Wound Care/Burns
- ☐ Another option not listed (please specify)

Position at Work

- ☐ Full-Time Therapist (100% hands)
- ☐ Full-Time Therapist (partial hands)
- ☐ Part-Time Therapist (100% hands)
- ☐ Part-Time Therapist (partial hands)
- ☐ Supervisor/Manager
- ☐ Administrator
- ☐ Owner of a Private Practice
- ☐ Researcher

- ☐ Educator
- ☐ Case Manager
- ☐ Another option not listed (please specify)

What licensure category do you belong to?

- ☐ Occupational Therapist
- ☐ Occupational Therapy Assistant
- ☐ Physical Therapist
- ☐ Physical Therapy Assistant
- ☐ Doctor of Medicine
- ☐ Another option not listed (please specify)

Number of years of practice in hand and upper extremity therapy

- ☐ 0-5 ☐ 6-10
- ☐ 11-15 ☐ 16-20
- ☐ 21-25 ☐ 26-30
- ☐ 31+

To which age group do you belong?

- ☐ 20-39 ☐ 30-39
- ☐ 40-49 ☐ 50-59
- ☐ 60-69 ☐ 70 and above

What is your racial or ethnic identity(ies)?

- ☐ American Indian or Alaskan Native
- ☐ Asian or Asian American
- ☐ Black or African American
- ☐ Hispanic, Latino, Latina or Latinx
- ☐ Middle Eastern or Northern African
- ☐ Native Hawaiian or Pacific Islander
- ☐ South Asian
- ☐ Southeast Asian
- ☐ White
- ☐ Prefer not to say
- ☐ Another option not listed (please specify)

What is your gender identity?

- ☐ Woman
- ☐ Man
- ☐ Genderqueer
- ☐ Non-Binary
- ☐ Transgender
- ☐ I prefer not to self-identify
- ☐ Another option not listed (please specify)

Membership in other allied organizations:

- ☐ AOTA ☐ APTA
- ☐ AAHS ☐ ASSH
- ☐ Another option not listed (please specify)

At what point in your career did you join ASHT (in years)?

- ☐ 1-5 ☐ 6-10 ☐ 11-15
- ☐ 16-20+ ☐ Student

Did you join ASHT before or after you were a CHT?

- ☐ Before
- ☐ After
- ☐ N/A

Salary Range

- ☐ Less than \$25,000
- ☐ \$25,000 - \$29,999
- ☐ \$30,000 - \$34,999
- ☐ \$35,000 - \$39,999
- ☐ \$40,000 - \$44,999
- ☐ \$45,000 - \$49,999
- ☐ \$50,000 - \$54,999
- ☐ \$55,000 - \$59,999
- ☐ \$60,000 - \$64,999
- ☐ \$65,000 - \$69,999
- ☐ \$70,000 - \$74,999
- ☐ \$75,000 - \$79,999
- ☐ \$80,000 - \$84,999
- ☐ \$85,000 or more

What degrees have you earned? (check all that apply)

Academic

- ☐ Associate
- ☐ AA
- ☐ AS

Bachelor's

- ☐ BA
- ☐ BS

Master's

- ☐ MA
- ☐ MBA
- ☐ MEd
- ☐ MPH
- ☐ MS

Doctorate

- ☐ DHS
- ☐ DHSc
- ☐ DPT
- ☐ EdD
- ☐ OTD
- ☐ PhD

Professional

- ☐ DO
- ☐ MD

Another option listed (please specify)

MEMBERSHIP CATEGORIES			
Member Type	Annual Dues	Eligibility	Features
Group Membership		Open to clinics, hospitals, institutions and companies with three or more employees. To activate Group Membership, please contact asht@asht.org for full details.	Tier 1 – Minimum of 3 members at 7% total discount Tier 2 – 4-9 members at 10% total discount Tier 3 – 10-19 members at 15% total discount Tier 4 – 20+ members at 20% total discount
Multiyear Membership	\$510 for two years	Open to Active and Associate members	Save on annual membership by bundling two years of dues into one payment
Active	\$275	Open to any registered or licensed occupational or physical therapist, who also holds the Certified Hand Therapist (CHT) credential.	An Active member may vote on all elective offices, hold elected office and serve on (or chair) committees.
New CHT	\$225	Open to any registered or licensed occupational or physical therapist, who earned the Certified Hand Therapist (CHT) credential within the past 12 months.	
Associate	\$275	Open to any registered or licensed occupational or physical therapist or foreign-trained therapist.	An Associate member may vote on all elective offices and serve on (but not chair) committees.
Step-Up	\$215	Open to graduates from a basic entry-level occupational or physical therapy program, or a post-professional doctoral program within the past 12 months. Candidates must send a letter from their department chair on university stationary stating graduation status.	A Step-Up (Associate) member may vote on all elective offices and serve on (but not chair) committees. (Verification required.)
Fellow	\$80	Open to any registered or licensed occupational or physical therapist who is participating in a full-time, residential fellowship program that pays with a stipend or a decreased salary. Candidates must send a letter from their fellowship coordinator indicating their participation in the fellowship and the type of payment/level of financial strain. This membership category can only be utilized for one year of a fellowship.	A Fellow member may vote on all elective offices and serve on (but not chair) committees. (Verification required.)
Affiliate	\$225	Open to registered or licensed occupational or physical therapy assistants, nurse practitioners, hand surgeons and other allied health professionals involved in the practice of hand therapy.	An Affiliate member may serve on (but not chair) committees. Affiliate members cannot vote.
Student	\$60	Open to students enrolled full time in a basic entry-level occupational or physical therapy program, or who are full-time students in a post-professional doctoral program. Candidates must send a letter from their department chair on university stationary stating enrollment status. Discounted, first-year introductory rate (\$30) for new student members.	A Student member may serve on (but not chair) committees. Student members cannot vote. (Verification required.)
Retired	\$90	Open to any current Active or Associate member who is no longer practicing but wishes to remain connected to the Society. ***	***Applications for Active Retired, Associate Retired, Active Leave of Absence or Associate Leave of Absence must be made in writing. Applications will be considered on a case by case basis. More information is available from ASHT Member Services at 856-380-6856. NOTE: These categories are intended for members who are unemployed or employed for less than 10 hours a week. <i>Requires a signed statement outlining the reason for the leave of absence. Supporting documentation is required.</i>
Leave of Absence	\$90	Open to any current Active or Associate member who has taken a planned or unplanned leave of absence from the profession.	