



Maintenance Form

AALAS Membership #: _____

Name (First) _____ (Middle) _____ (Last) _____

Home address: _____

City: _____ State _____ Zip _____

Home phone: _____ Fax: _____

E-mail _____

Business address: _____

Address _____

City: _____ State _____ Zip _____

Business phone: _____ Fax: _____

E-mail _____

Preferred Mailing Address: Home Work

Please mark all that apply

I have:

- applied to ICPM
- completed the three ICPM management exams
- taken one or more of the management exams, but not completed all three exams
- taken and passed the AR exam
- not applied to ICPM
- not taken any of the ICPM management exams
- taken but not passed the AR exam
- not taken the AR exam

Payment Information

Balance Due\$25

Total Enclosed\$ _____

- Check (Number: _____) Money Order VISA
- American Express MasterCard Discover

Cardholder name: _____
(print name exactly as it appears on card)

AALAS Member # _____

Billing address: _____

City: _____ State: _____ Zip: _____

Cardholder Phone Number: _____

Country: _____

Signature: _____

Account Number—please include all digits

Month Year

Expiration Date

CVV2 Code (3 or 4 digit # on back of credit card)

CVV2 Code (3 or 4 digit # on back of credit card)

PLEASE NOTE: You may only apply for one extension to take the Animal Resources Exam. If you have not taken the exam by the end of this 15-month extension, you must submit a new application and pay the exam fee again.

Make checks payable to: **AALAS**. Send to: AALAS, 9190 Crestwyn Hills Dr., Memphis, TN 38125-8538 or fax to 901-753-0046. If submitting by fax, please fax the payment page **only once** to avoid duplication of credit card charge.

FOR OFFICE USE ONLY

Payment Type I W