



**Identify area(s) about which you would be willing to share your expertise:**

- Policy and Procedures Manual
- Staff Roles and Job Descriptions
- Administrative Software
- Tracking Software
- Breast Center Physical Settings
- Starting a Breast Center
- Expanding a Breast Center to a Women's Center
- Marketing Techniques
- Machinery and Equipment Purchase/Feasibility
- Merging Facilities/Buyouts - Patient Impact
- Merging Facilities/Buyouts - Administrative/Operation Impact
- Other areas of expertise:  
\_\_\_\_\_

- Clinical Pathway Development
- Mobile Mammography
- Patient Educational Resources
- Lymphedema Programs
- High Risk Programs
- Out reach programs
- Clinical Trials
- Breast Reconstruction
- Breast Augmentation
- Nutritional Counseling/Information
- Psycho-social services/programs
- Other areas of expertise:  
\_\_\_\_\_

**Payment Options**

**Dues Payment Schedule:**

-- Membership is from October 1 through September 30.

-- Payments received between October 1 and February 28, from all new member applicants, cover membership through September 30 and are at the annual dues rate. **Annual dues are \$90 for the additional member.**

-- Payments received between March 1 and May 31, from new member applicants, cover membership through September 30 and are at the rate of \$50.

-- Payments received after June 1 and before September 30, from new member applicants, will be at the annual dues rate and will cover the remainder of that year and all of the next year.

**Your Membership Certificate  
will contain**

both your name and the name of your facility

- Paying by check
- Paying by Visa, MasterCard, Discover and American Express  
(complete below)

Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVV2#: \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Charge amount authorized \$ \_\_\_\_\_

Signature \_\_\_\_\_

Date of Application \_\_\_\_\_