

The Colorado Association of Surgical Assistants Membership Application

Last Name _____ First Name _____ MI _____

Home Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

E-mail _____

Title _____ Certification or License # _____

State or National _____ Expiration Date _____

Please provide documentation necessary to verify eligibility according to classifications if applicable

Membership Type	<input type="checkbox"/> New Application	<input type="checkbox"/> Annual Renewal
Membership Classification	Please check appropriate box for dues	
Active	<input type="checkbox"/> 1 year \$100.00	<input type="checkbox"/> 2 years \$180.00
Associate	<input type="checkbox"/> 1 year \$100.00	<input type="checkbox"/> 2 years \$180.00
Affiliate	<input type="checkbox"/> 1 year \$100.00	<input type="checkbox"/> 2 years \$180.00
Student	<input type="checkbox"/> 1 year \$50.00	<input type="checkbox"/> 2 years \$90.00
Retired	<input type="checkbox"/> 1 year \$50.00	<input type="checkbox"/> 2 years \$90.00

You may also make an additional Charitable Donation to the Colorado Association of Surgical Assistants. If so, please complete the information below and include any donation amount with your final payment.

Yes I would like to make a Charitable Donation in the amount of \$ _____

I would like my donation directed to the following:

Student Scholarships \$ _____ Workshops / Educational Events \$ _____

Legislation \$ _____ General Expenses \$ _____

Visa MasterCard Check Total Amount \$ _____

Card Number Sorry, however we are unable to accept Expiration Date ____/____/____
credit cards payments at this time

Signature _____

Make checks payable to the Colorado Association of Surgical Assistants
Send to: 820 S. Monaco Pkwy #253, Denver, CO 80224



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Membership Information

Definition: A surgical assistant is an allied health professional; who possess expertise in the theory and application of sterile and aseptic techniques, who combines knowledge of human anatomy, pharmacology, surgical procedures, and the implementation of surgical instrumentation and technologies to facilitate a surgeon's performance of invasive therapeutic and diagnostic procedures.

Classification:

A. Active Member

1. One who possesses a nationally recognized certificate of examination or state licensure and maintains certification / licensure currency as defined by the individual governing body.
2. Individuals will be allowed 3 years to attain said certification or licensure, after which time their membership status will be lowered to Associate or Affiliate Member.
3. Active members have voice and vote in the association.

B. Associate Member

1. One who has previously complied with requirements of an Active Member and who is not considered "current" or failed to comply with requirements within 3 years.
2. One who can provide notarized documentation from his/her employer that she/he is employed as a surgical assistant.
3. One whose primary source of employment is teaching in a CAAHEP accredited Surgical Assistant program or its equivalent.
4. Associate members have voice but no vote in the association.

C. Affiliate Member

1. Any individual or organization that wishes to affiliate with CASA and is approved by the Board of Directors as defined in the CASA Policy Manual.
2. Affiliate members have voice but no vote in the association.

D. Student Member

1. One who has proof of either having completed or being currently enrolled as a student in a CAAHEP accredited Surgical Assistant program or its equivalent.
2. Student members have voice but no vote in the association.

E. Retired Member

1. One who provides proof of reaching age 65 or provides proof of permanent disability resulting in an inability to work.
2. Retired members rights to have voice or vote will be based upon the criteria of Active, Associate, Affiliate or Student membership.

F. Honorary Member

1. One who has served as a President or Vice-President of CASA.
2. One who has rendered notable service to CASA and is approved by the Board of Directors upon nomination of the membership.
3. Honorary members rights to have voice or vote will be based upon the criteria of Active, Associate, Affiliate or Student membership.

Dues: CASA dues may not be collected by any other entity other than CASA. Membership benefits shall begin upon receipt of dues at CASA. A member whose dues are not received at CASA within 60 days from the renewal date shall be delinquent and forfeit all membership privileges. Reinstatement shall be effective upon payment of dues.