

American Physical Therapy Association

2012 INTERNATIONAL PARTNERS APPLICATION

BENEFITS OF BELONGING

International Partners enjoy many benefits, including:

- Online access to full text of APTA's scientific journal, *Physical Therapy*, and *PT in Motion* magazine.
- Online access to Hooked on Evidence, APTA's growing database of current research evidence on the effectiveness of physical therapy interventions.
- Access to APTA Member pricing on publications, conferences, courses, and more.
- Expanded access to select content on APTA's Web site (www.apta.org).

- Open Door: APTA's portal to evidence-based practice. Free online access to text articles and abstracts from more than 2,500 health care-oriented periodicals. Open Door also features full-text Cochrane systematic reviews, Medline, an expanded Current Research in Physical Therapy section, open access resources, and more.



WHO IS ELIGIBLE?

Individuals applying to become International Partners must meet the following qualification:

- A physical therapist or physical therapist student who lives in a country other than the United States and who is not eligible for membership within the American Physical Therapy Association.

ANNUAL SUBSCRIPTION FEE

\$50.00 US Dollars

American Physical Therapy Association 2012 International Partners Application

If you meet the qualifications for International Partners, complete the following application and return it to APTA with the appropriate payment. Mail your application and payment to American Physical Therapy Association, P.O. Box 79054, Baltimore, MD 21279-0054.

Applicant Information

First Name	Middle Name	Last Name
Mailing Address		
Address		
City	State/Province	
Zip/Postal Code	Country	
Office Phone	Home Phone	Fax
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E-mail		

Eligibility Statement (Required)

I certify that I am a physical therapist or physical therapist student who lives in a country other than the United States and who is not eligible for APTA membership.

Signature _____ Date _____

Please indicate your applicant type:

Physical Therapist Applicant

Student Applicant

Payment Method

Please check one method of payment.

Check made payable to APTA in the amount of \$ _____

Please charge \$ _____ to my:

VISA MasterCard American Express

Credit/Debit Card # _____

Expiration Date _____

Billing Address _____

Cardholder's Name _____

Signature _____

