A Foundation For The Future Of Interventional Pain Management

We are proud to announce the formation of the **ASIPP Charitable Foundation**. Since 1998, the **American Society *of* Interventional Pain Physicians** has tirelessly promoted the development and practice of safe, high-quality, and cost-effective interventional pain management techniques. **ASIPP** has also worked to ensure patient access to these interventions.

The mission and initiative of **ASIPP** have evolved over the years to meet the changing needs of the members and the specialty through our efforts in education, scholarly publications, certification and advocacy. But **ASIPP** would like to take the mission of the preservation and development of interventional pain management to a higher level. The **ASIPP Foundation** will bring to interventional pain management:

- *Research that adds to the base of knowledge for interventional pain medicine;*
- *Promotion of interventional pain medicine among medical students, fellowships and residencies;*
- *On going education, certification and training for physicians and medical students; and*
- *Mentoring programs for medical students, fellows, residents and physicians who are new to interventional pain management*

As a 501(c) (3) organization the **ASIPP Foundation** raises and manages funds that assist in the promotion of educational initiatives, the support of residencies and fellowships, scholarship and research. As part of your support **ASIPP** has established three broad areas you can designate for your contribution: 1. General Fund, 2. Research, and 3. Education

Your tax deductible gift today to the **ASIPP Foundation** is critical to the advancement of our profession and patient access to this vital, life-enhancing care. Please use the **ASIPP Foundation** Gift Form make your contribution. Thank you for your partnership and support of the **ASIPP Foundation**.

ASIPP FOUNDATION GIFT FORM

My **ASIPP Foundation** gift is:

❏ $25,000 ❏ $15,000 ❏ $10,000 ❏ $5,000 ❏ Other: $_____

❏ My Check is enclosed (*Please make payable to **ASIPP Foundation, Inc.***)

Credit Card Type: ❏ Visa ❏ MasterCard ❏ Discover ❏ Other: _____

Number: _____ Expiration Date: _____

Signature: _____

I would like my gift to be devoted to :

❏ General Fund ❏ Research ❏ Education

❏ I would like more information on supporting the **ASIPP Foundation**.

*The **ASIPP Charitable Foundation** is a 501 (c)(3) organization. All gifts are tax deductible to the extent allowed by law. Thank you for your generous support!*

ASIPP FOUNDATION
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Building a foundation for the future of Interventional Pain Management