Oregon Society of Radiologic Technologists

Application for Membership

PLEASE PRINT CLEARLY

Last Name_____ First Name_____

Street Address_____ Professional Credentials _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____ Ext _____

E-Mail _____

►Please check **ONE** of the following member categories◄

☐ **Voting Member ~ $50**
- Certified by ARRT or it's equivalent and holding an unrestricted license under state statute
- May vote and hold office in Society
- Life members

☐ **Non Voting Member ~ $50**
- Members interested in promoting the purposes and functions of OSRT but do not meet the qualifications of voting members
- Limited permit holders, Honorary members, supporting members, & retired members
- May not vote or hold office in Society

☐ **Student Member ~ $25**
- Members currently enrolled in an accredited Radiologic Science Program
- May not vote or hold office in Society

Name of School:_____

☐ Check this box if you claim your membership dues on your income tax

License Status: mark one

☐ Oregon License #_____

☐ ARRT certification #_____

☐ ASRT Member #_____

You may join online and pay via PayPal at: www.oregonsrt.org

Certified in: check all that apply

☐ Radiography ☐ Mammography ☐ MRI
☐ CT ☐ QM ☐ Radiation Therapy
☐ Nuclear Medicine ☐ Diagnostic Sonography ☐ Other _____
☐ CIT ☐ Bone Densitometry

Work Status ~ place of employment ~ ☐ Hospital ☐ Dr's Office ☐ Clinic ☐ Ed. Facility ☐ Other _____

☐ Help ensure the future of our profession by donating to the OSRT Scholarship Fund. Every dollar you contribute helps provide scholarship opportunities for students enrolled in accredited RT programs within Oregon. $_____

To Charge: VISA or MC number: _____ 3-Digit Security Code on back of card (**required**):_____

Expiration Date: _____ Name on Card: _____

Address on card if different from applicant: _____Zip:_____

_____ _____ $_____

Signature date amount enclosed

❖❖Send completed application and check/charge info to ~ **OSRT, PO Box 213, Salem, OR 97308 or pay online via PayPal** ❖❖

Form revised 8/12