



## APPLICATION FOR MEMBERSHIP

FULL NAME: \_\_\_\_\_ PHONE #: (H) \_\_\_\_\_

STREET: \_\_\_\_\_ AREA #: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

MAIDEN NAME: \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**CHECK ALL CATEGORIES THAT APPLY:**

1.  RTR;  RTM;  RTT;  RTN;  RDMS;  CT;  MRI;  CVI;  RVT;  
 OTHER: \_\_\_\_\_

2. AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGY (ARRT)# \_\_\_\_\_  
 AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGISTS (ASRT)  YES -- EXPIRATION DATE: \_\_\_\_\_.  NO  
 I HAVE APPLIED FOR MEMBERSHIP TO ASRT: \_\_\_\_\_ DATE \_\_\_\_\_. Send a copy of your ASRT card  
 PREVIOUS ISRT MEMBER:  NO;  YES.

3. STUDENT:  
 RADIOLOGIC TECHNOLOGY PROGRAM: \_\_\_\_\_ GRADUATION DATE: \_\_\_\_\_

4. LIMITED RADIOGRAPHER:

PLEASE SUBMIT THE APPROPRIATE FEE ACCORDING TO YOUR MEMBERSHIP STATUS. MAKE CHECKS PAYABLE TO: **ISRT**

- |   |                                |
|---|--------------------------------|
| 1. ACTIVE (MUST BE ASRT & ARRT)                             | \$40.00                        |
| 2. ASSOCIATE (MUST BE ARRT)                                 | \$45.00                        |
| 3. STUDENT (IN R.T. PROGRAM)                                | \$15.00 Graduation Date: _____ |
| Name of School: _____                                       |                                |
| 4. SUPPORTING (NOT ARRT)                                    | \$45.00                        |
| 5. INACTIVE (NO LONGER EMPLOYED IN THE RADIOLOGIC SCIENCES) | \$40.00                        |

**PLEASE ADD AMOUNT TO YOUR DUES.**

\*If ISRT membership has expired, add an additional \$5.00 for re-instatement fee: \$ 5.00

\*I wish to contribute to the Mary Ann Jennings Student Scholarship Fund: \$ \_\_\_\_\_

\*I wish to contribute to the Radiologic Technologists Scholarship Fund: \$ \_\_\_\_\_

I hereby make application for membership in the Iowa Society of Radiologic Technologists. I agree to support the Constitution and Bylaws of the Society and conform to the Code of Ethics adopted by it.

PLEASE SIGN: \_\_\_\_\_ DATE: \_\_\_\_\_

MAIL TO EXECUTIVE SECRETARY OF THE ISRT:

REVISED: 11/82; 11/86; 11/95; 2/2003; 4/2006; 4/2007; 8/2009; 10/2010; 7/2011,6/2012

Joni Caplan, Exec. Sec  
 520 Brookland Pk Dr  
 Iowa City, IA 52246