

# MEMBER APPLICATION

Please answer all questions. Type or print legibly and return to the address at the bottom of the form.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Maiden/Other Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Primary Email Address \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Secondary Email Address \_\_\_\_\_ Gender:  Female  Male  
 Have you ever been a member of the ISRT?  No  Yes - Under what name were you previously a member? \_\_\_\_\_

## ISRT VOLUNTEER OPPORTUNITIES

please check all that apply.

### I am interested in:

SERVING ON AN ISRT COMMITTEE

YES  NO

SERVING AS AN ISRT OFFICER

YES  NO

PRESENTING A LECTURE

YES  NO

## MEMBERSHIP CATEGORY ANNUAL DUES

(PLEASE SELECT ONE)

- ACTIVE — \$40.00** Enclose a copy of your ARRT (American Registry of Radiologic Technologists) CARD, or equivalent. (This excludes Retired Status ARRT card)
- LIMITED X-RAY MACHINE OPERATOR — \$40.00** Enclose a copy of your current INDIANA LIMITED GENERAL STATE LICENSE
- SUPPORTING — \$40.00**
- RETIRED — \$20.00** Enclose a copy of your CURRENT RETIRED ARRT (American Registry of Radiologic Technologists) CARD, or equivalent.
- STUDENT — \$10.00** Complete the information below and enclose a copy of your INDIANA RADIOLOGY STUDENT PERMIT

Graduation month & year \_\_\_\_\_  First year  Second year

Program name & city \_\_\_\_\_ Program Director's name \_\_\_\_\_

The ISRT membership year begins on February 1 and ends on January 31 of the following year. Individuals may join the ISRT at any time during the year. Membership applications received prior to the Annual Conference will be processed for the current year and will expire on January 31. Membership applications received after the Annual Conference will automatically be processed for the new membership year, which begins on February 1. Dues are nonrefundable.

- Membership processing may take up to 21 business days.
- Please make check or money order payable to the ISRT. **Please do not send cash.** Credit card payments may be made online through the ISRT website [www.isort.org](http://www.isort.org).
- Send total payment due and required documentation (see Membership Categories above) to:

JANE PATTON, RT(R)(CT)  
ISRT EXECUTIVE SECRETARY  
929 S. SYCAMORE ST.  
MARTINSVILLE, IN 46151

- To guarantee the quickest processing time of your ISRT membership, please provide a copy of any requested documentation.

Please Do Not Write in this Section

RCVD \_\_\_\_\_  
AMOUNT \_\_\_\_\_  
CHECK # \_\_\_\_\_  
VERIFIED \_\_\_\_\_

## TECHNOLOGISTS:

PLEASE SELECT AN APPROPRIATE RESPONSE IN EACH CATEGORY. Disclosure of this information is optional. This information is confidential and truly helpful for the ISRT to serve you.

### ARRT PRIMARY CERTIFICATION(S):

- RADIOGRAPHY (R)  
 NUCLEAR MEDICINE (N)  
 RADIATION THERAPY (T)  
 SONOGRAPHY (S)—THROUGH ARRT AND NOT ARDMS  
 MAGNETIC RESONANCE IMAGING (MR) - PRIMARY THROUGH ARRT

### ARRT POST-PRIMARY EXAMINATION(S) COMPLETED:

- BONE DENSITOMETRY (BD)  
 BREAST SONOGRAPHY (BS)  
 CARDIAC-INTERVENTIONAL (CI)  
 CARDIOVASCULAR-INTERVENTIONAL (CV)  
 COMPUTED TOMOGRAPHY (CT)  
 MAGNETIC RESONANCE (MR) - POST-PRIMARY MAMMOGRAPHY (M)  
 QUALITY MANAGEMENT (QM)  
 REGISTERED RADIOLOGIST ASSISTANT (RRA)  
 SONOGRAPHY (S)—THROUGH ARRT AND NOT ARDMS  
 VASCULAR-INTERVENTIONAL (VI)  
 VASCULAR SONOGRAPHY (VS)

### OTHER CERTIFICATIONS/EXAMINATIONS COMPLETED THROUGH AN AGENCY OTHER THAN ARRT:

- BONE DENSITOMETRY  
 CARDIOVASCULAR-INTERVENTIONAL (CCI)  
 NUCLEAR MEDICINE (NMTCB)  
 SONOGRAPHY (ARDMS)—RDMS, RCDS, RVT  
 LIMITED INDIANA CERTIFICATION,  
 TYPE OF CERTIFICATION: \_\_\_\_\_  
 OTHER: LIST TYPE \_\_\_\_\_

### PRIMARY PRACTICE: IN WHICH AREA OF THE PROFESSION DO YOU SPEND MORE THAN HALF OF YOUR TIME? (SELECT ONLY ONE)

- RADIOGRAPHY (INCLUDES CT, MR, QA, MAMMOGRAPHY, VASCULAR, ETC.)  
 NUCLEAR MEDICINE  
 RADIATION THERAPY  
 SONOGRAPHY  
 OTHER: PLEASE LIST AREA \_\_\_\_\_

### POSITION: IN WHICH POSITION DO YOU SPEND MORE THAN HALF OF YOUR TIME? (SELECT ONLY ONE)

- BONE DENSITOMETRY  
 CARDIAC-INTERVENTIONAL  
 COMPUTED TOMOGRAPHY  
 CORPORATE  
 DOSIMETRY  
 EDUCATION (PROG DIR, INSTRUCTOR)  
 FUSION (e.g., PET/CT)  
 INDUSTRIAL  
 INFORMATICS (COMPUTER SYSTEMS)  
 MAGNETIC RESONANCE  
 MAMMOGRAPHY  
 MANAGEMENT (SUPERVISOR, CHIEF TECH)  
 NUCLEAR MEDICINE  
 QUALITY ASSURANCE/ASSESSMENT  
 RADIATION THERAPY  
 RADIOGRAPHY  
 RADIOLOGIC NURSE/LPN  
 RADIOLOGIST ASSISTANT OR RPA  
 RESEARCH  
 SIMULATION  
 SONOGRAPHY  
 VASCULAR INTERVENTIONAL  
 NOT CURRENTLY EMPLOYED  
 EMPLOYED IN FIELD OTHER THAN RADIOLOGIC SCIENCES  
 RETIRED  
 OTHER: PLEASE LIST \_\_\_\_\_