

The Nebraska Society of Radiologic Technologists

An Affiliate of the American Society of Radiologic Technologists



MEMBERSHIP APPLICATION

MEMBERSHIP YEAR ENDING: **JUNE 30, 2012**

NAME: _____ / _____
(First) (MI) (Last) (Maiden Name – If Applicable)

S.S. #: _____ NEBR. LICENSURE/CERTIFICATION #: _____

ADDRESS: _____
(Street, PO Box, Apt #) (City, State, Zip + 4)

EMAIL ADDRESS: _____

PHONE # (Home): _____ (WORK) _____

FACILITY & ADDRESS WHERE EMPLOYED: _____

CHECK ALL CATEGORIES THAT APPLY TO YOU

- ARRT Registry #:** _____ Active Inactive
- Radiography Nuclear Medicine Radiation Therapy Sonography Cardiovascular-Interventional CT MRI
 Mammography QM Bone Densitometry Vascular Sonography Breast Sonography Vascular-Interventional
 Cardiac Interventional R.R.A.
- RDMS RVT CNMT R.P.A.
- Member of the American Society of Radiologic Technologists (ASRT)?** Expiration Date: _____
 Active Student Associate Retired
- Full Time Radiation Science Student (Documentation of enrollment from Registrar must accompany application)
Educational Facility: _____
Program being attended: _____
Expected date of graduation: _____
- Commercial Representative – Company: _____
- Limited Radiographer

PLEASE SUBMIT APPROPRIATE FEES

ACCORDING TO YOUR MEMBERSHIP STATUS

Make checks payable to: Nebraska Society of Radiologic Technologists

- Active** – Must be an active member of the **ASRT & ARRT/ARRT** eligible - - **\$45.00**
 Associate – Must be ARRT/ARRT eligible or Nebraska Licensed or Limited Scope Radiographer - - **\$45.00**
 Student – Must be full-time (Documentation Required) - - **\$15.00 (one year) \$30.00 (two years)**
 Inactive – No longer engaged in the field of Radiologic Technology - - **\$45.00**
 Retired – ARRT Registered, retired from practice - - **\$45.00**

Make checks payable to NSRT
Mail Application and Payment to:
Nebraska Society of Radiologic Technologists
1924 West 13th Street
Grand Island, Nebraska 68803

***** MEMBERSHIPS ARE NONREFUNDABLE *****