



Membership Application
Michigan Society of Radiologic Technologists
Affiliated with the American Society of Radiologic Technologists



Name: _____ County of Residence: _____

Address: _____
 Street City State Zip

E-Mail Address: _____

R.T. Registry # _____ ASRT Member # _____ Not ASRT Member

Credential(s) R.T. (R) (M) (N) (T) (CT) (MR) (CV) (QM) (BD) (CI) (VI) Other

Student Technologist: Graduation Date: _____

Commercial Representative / Company Name: _____

Please Mark One Membership Option:

One Year

Two Year

Three Year

\$30.00 Active Member
(Must be ASRT Member)

\$55.00 Active Member

\$80.00 Active Member

\$30.00 Associate Member
(Non ASRT Member)

\$55.00 Associate Member

\$80.00 Associate Member

\$30.00 Affiliate Member
(RT and/or Commercial Representative)

\$55.00 Affiliate Member

\$80.00 Affiliate Member

\$10.00 Student Member

\$18.00 Student Member

\$26.00 Graduate Student

Membership Pins are available for \$15.00 each.

of Pins _____

Membership begins on the date your application is received.

MSRT publication *Technically Speaking*, is available online to all members @ www.msrt.org

This application/renewal may also be printed and sent to:

Les Rowe, MSRT
 1485 West Textile Rd.
 Ann Arbor, MI 48108

Membership Level \$ _____
 MSRT Pins \$ _____
 Total \$ _____

Please make checks payable to MSRT

Credit Card: Visa MasterCard Other

Card Number _____ Exp. Date ___/___/___

Signature _____