

Please Print First and Last Name _____

STEP 4

Membership Personalization

Select Your Journal Preference

Select the subject area that best fits your needs. For more information, visit asrt.org/journalpreference.

Select only one.

- Computed Tomography
- Mammography
- Radiation Therapy
- General Content Edition

Select Your Chapter

ASRT chapters allow members in different disciplines, specialties or career pursuits special representation in the Society's governing body, the ASRT House of Delegates. Enrollment in one primary chapter is included free as a standard part of membership.

Joining an additional ASRT chapter connects you with even more like-minded professionals and shows your commitment to your profession. **Joining secondary chapters costs \$5 per chapter per year.** If selecting more than one chapter, indicate chapter in numeric preference (1, 2, 3...).

Select chapter(s).

- | | |
|--|---|
| <input type="checkbox"/> Bone Densitometry | <input type="checkbox"/> Management |
| <input type="checkbox"/> Cardiac Interventional and Vascular Interventional Technology | <input type="checkbox"/> Military |
| <input type="checkbox"/> Computed Tomography | <input type="checkbox"/> Nuclear Medicine |
| <input type="checkbox"/> Medical Dosimetry | <input type="checkbox"/> Quality Management |
| <input type="checkbox"/> Education | <input type="checkbox"/> Radiation Therapy |
| <input type="checkbox"/> Magnetic Resonance | <input type="checkbox"/> Radiography |
| <input type="checkbox"/> Mammography | <input type="checkbox"/> Registered Radiologist Assistant |
| | <input type="checkbox"/> Sonography |

STEP 5

Membership Options

Continuing Education Option – Choose One

- Directed Reading Flex Plan
- Traditional Plan

You can compare the options at asrt.org/flex.

Premium Option

- Get more from your ASRT membership for only \$20. asrt.org/premium
 - Specially designed membership card
 - Collectible lapel pin
 - *ASRT Insider* newsletter
 - 3 additional CE credits for members who choose the DR Flex Plan
- 25% off select items in ASRT Store
- 10% off ASRT Educational Symposium fee
- 10% off NRTW® products

Additional Premium Benefits for Students

- Access to 3 additional Radiography or Radiation Therapy SEAL® Exams (8 total)
- Mailed copies of ASRT publications

STEP 6

Payment Information

Member dues payment \$ _____

Premium option (____ x \$20 per year) \$ _____

Total secondary chapter fees (____ x \$5 per chapter per year) . . . \$ _____

ASRT Foundation donation \$ _____

Application fee (not refundable) \$ 10.00

Total enclosed \$ _____

Overpayments of \$25 and less will be prorated to extend the length of your membership term.

Payment Method Please indicate payment method.

- Check or Money Order Credit Card **Please do not send cash.** Dues payments must be in U.S. funds only.

Card No. _____ Name (as it appears on card) _____

Expires (mm/yy) ____ / ____ / ____ Signature (as it appears on card) _____

From your member dues, \$7.61 per year is spent on *ASRT Scanner*, \$9.19 per year on *Radiologic Technology* and \$2.41 per year on *Radiation Therapist*. In accordance with Sec. 6033(e) of the Internal Revenue Code, please be advised that 0% of membership dues are allocable to lobbying activities of ASRT and, as such, are deductible for tax purposes under Sec. 162E of the Code. Membership dues are not deductible as charitable contributions, but might be deductible as a business expense. Members should seek a tax professional's advice regarding dues deductibility as a business expense.

When you provide a check as payment, you authorize ASRT either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.

Promo Code _____