



Florida Cancer Registrars Association

Furthering Cancer Care and Research

NAME: _____ CREDENTIALS: _____

INSTITUTIONAL AFFILIATION: _____

BUSINESS ADDRESS: _____

CITY, STATE, POSTAL ZIP: _____

BUSINESS PHONE: _____ BUSINESS FAX: _____

BUSINESS E-MAIL: _____

HOME ADDRESS: _____

CITY, STATE, POSTAL ZIP: _____

HOME PHONE: _____ HOME FAX: _____

HOME E-MAIL: _____

PREFERRED E-MAIL ADDRESS: BUS. _____ HOME: _____

PREFERRED MAILING ADDRESS: BUS. _____ HOME: _____

Have you ever been a member of FCRA (Florida Cancer Registrars Association): YES _____ NO: _____

If you have earned your CTR within the past 12 months, FCRA is giving you your initial year of membership for free in recognition of your achievement! Congratulations!! In this case, when did you pass the CTR exam?
March 201__ September 201__.

Do we have your permission to post your name and membership information in the “Members Only” area in the FCRA roster on the FCRA Web-Site: YES _____ NO _____

MEMBERSHIP CATEGORIES:

ACTIVE: An ACTIVE member shall be a resident of Florida, a CTR or person who is involved in any facet of the cancer registry work and who has paid current dues. An active member in good standing shall be entitled to all membership privileges, including the right to vote, hold office, or chair a committee.

ASSOCIATE: An ASSOCIATE member shall be any person interested in FCRA who has paid the dues and who does not meet qualifications for ACTIVE member. An associate member shall be entitled to vote but not hold office or chair a committee, but may be appointed to serve on a committee. This membership includes CTR’s who are no longer active in the field.



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HONORARY LIFE: Past Presidents shall automatically become HONORARY LIFE MEMBERS upon retirement from the registry profession. They shall retain all privileges of active membership. An exempt status for paying dues is awarded in recognition of those FTRA Presidents, who served during the early start-up years of 1978 through 1982.

HONORARY: A person who has made a significant contribution to the profession of cancer registry administration or has rendered distinguished services in the profession or its related fields may be elected to HONORARY membership by unanimous vote of the membership. His/ her name is recommended by the Executive Committee. (Exempt from dues.)

CHARTER: A member who joined within one year of adoption of the original By-laws shall be designated as a CHARTER member. A CHARTER member may pay their dues as an active member or as an associate member.

MEMBERSHIP FEES: (Mail completed application with appropriate fee to FCRA Membership Chair and make your check payable to FCRA.)

Current Membership Chair:

Debbie Nooft, CTR
1500 Sunset Road #G10
Tarpon Springs, FL 34689
E-mail: membership@fcra.org

Check One: Active \$25 _____ Assoc/Student \$15 _____ New CTR (one year free!) _____

PLEASE CHECK BELOW IF YOU WOULD BE INTERESTED IN WORKING WITH FCRA IN ANY OF THE FOLLOWING AREAS:

- _____ Chairman of Standing Committee
- _____ Holding an Executive Office
- _____ Hosting Regional Workshop at your Facility

I hereby apply for membership and agree to abide by the By-laws of the Florida Cancer Registrars Association:

SIGN: _____ DATE: _____