



NEW YORK CANCER REGISTRARS ASSOCIATION MEMBERSHIP APPLICATION

Name _____ Credentials _____

Institution Affiliation _____

Approval Status ACOS Approved _____ ACOS Eligible _____ Formal Registry _____
 State Reporting Only _____ Central Registry _____ Vendor _____

Occupation (Job Title) _____

Business Phone (_____) _____ Preferred Phone (cell, home, etc)(_____) _____

Preferred E-Mail _____

Business Address: _____ Home Address: _____

Please send mail to (circle one): Business Address Home Address

Are you a new member of NYCRA or are you renewing your membership? NYCRA Member you were referred by (if any) _____	NEW	RENEW
Are you interested in being listed in the Members ONLY Directory of NYCRA?	YES	NO
Are you currently a member of the National Cancer Registrars Association?	YES	NO
Are you currently a member of additional local/reg cancer registrars association:	YES	NO

If Yes, name of association (other than NYCRA) _____

Membership status (Circle One) Active Sustaining Student

Description of Membership Classifications:

ACTIVE: Actively involved in cancer registry activities within any hospital or health facility; privileges include the right to vote, to hold office or to chair a committee. PLEASE NOTE: If your job entails State Reporting Only you are considered an ACTIVE member.

SUSTAINING/STUDENT: Currently not engaged in tumor registry activity, but have an interest in the goals of this Association. Do not or have not worked in the field; may not vote, hold office or chair a committee.



Would you be interested in running for an office or serving on the NYCRA Board as a committee member?

Officer _____
Signature _____

Committee _____
Date _____

New York Cancer Registrars Association
Dues Notice

Annual Membership Dues 11/1/2024 – 10/31/2025

NOTE: IF YOU ATTEND NYCRA’S OCTOBER 2024 ANNUAL EDUCATIONAL CONFERENCE YOU WILL AUTOMATICALLY BE A MEMBER, PLEASE DO NOT RENEW OR SEND MEMBERSHIP DUES.

MEMBERSHIP RENEWAL DEADLINE IS 3/1/25 FOR THOSE WHO WERE NOT IN ATTENDANCE.

Please circle one:

- ACTIVE (includes State Reporting Only) \$45.00
- SUSTAINING \$15.00
- STUDENT \$15.00

A 3.5% PROCESSING FEE WILL BE APPLIED FOR ONLINE PAYMENTS

OR

Make check payable to NYCRA and mail with this form to:

**Tarah Hoogkamp, CTR
63 Vosburgh Trailer Park
Mechanicville, NY 12118**

Please visit our website: www.nycra.net