



OCRA Membership Application for 2021
(Check and cash only)

To pay by CC register online: <http://www.ocra-oregon.org/membership/>

*If you are a **new member**, once you have your user name/pw for OCRA you will need to update your profile with your information. If you are an **existing member**, it is your responsibility to make changes on your profile. <http://www.ocra-oregon.org/>*

NAME: _____ CREDENTIALS: _____

EMPLOYER: _____ POSITION: _____

PREFERRED EMAIL: _____

PREFERRED PHONE: _____

Membership Classifications:

Active Member: Certified Cancer Registrars or persons whose primary occupation is involved with any or all facets of cancer registry work. (i.e., abstractors, follow-up staff, contractors)

Student Membership: Shall be persons who do not meet the requirements for an Active membership and are enrolled in an allied health care curriculum. A Student Member shall be eligible for this classification of membership for no more than one consecutive two-year period. A Student Member shall be entitled to serve on committees but shall not vote, hold office or chair a committee.

I am applying for: _____ **Active Membership - \$45.00 per year**

_____ **Student Membership – no charge**

School name/Program: _____

Dues shall be due on **November 1st**. Membership will be declared forfeited after **the 15th day in December**. A former member whose membership had been forfeited for nonpayment of dues must submit a new application for membership with annual dues. If denied membership, the dues shall be refunded. Any **new (1st time)** member joining prior to the workshop will pay the full membership fee and be retroactively instated as a member and able to register as an OCRA member for the workshop.

SIGNATURE OF APPLICANT

DATE

All fields are required & signature to process application.

Send application and payment to OCRA Treasurer

Martha Curl

722 NE Stoneridge Loop Prineville, OR 97754