

**Notice of No Solicitation**  
**WCRA Bylaws Article II #5: It is NOT the purpose of this Association to be used for either business or political purpose or for any pecuniary gain or profit for any of its members.**

**WISCONSIN CANCER REGISTRARS ASSOCIATION**  
**2018 MEMBERSHIP APPLICATION**

\*\*\*Please print clearly\*\*\*

NAME: \_\_\_\_\_ CREDENTIALS: \_\_\_\_\_

TITLE: \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

EMPLOYER \_\_\_\_\_

FACILITY(S) REPORTING FOR \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

BUSINESS PHONE: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ EXT. \_\_\_\_\_

BUSINESS FAX: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ SOFTWARE \_\_\_\_\_

**PERSONAL INFORMATION- optional Please note that personal information is never posted on the WCRA website unless you work remotely and have included your home address as your business address**

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

PREFERRED MAILING ADDRESS:      **BUSINESS**            **HOME**     

DUES:              \$25.00 PER FISCAL YEAR (NOV 1<sup>st</sup> – OCT 31<sup>st</sup>)

New Member               Renewal

Total Enclosed: \_\_\_\_\_

**Please make your check or money order payable to WCRA.**

**Dues must be received by Dec 31, 2017. Renewal dues will not be accepted after 12/31/17.**

**Please return to:**              Samantha Reynolds, CTR  
WCRA Treasurer  
3405 Bluejay Lane  
Wausau, WI 54401

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_