

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 purposes or for any pecuniary gain or profit for any of its members.

WISCONSIN CANCER REGISTRARS ASSOCIATION
2027 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. _____

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

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: (_____) _____ - _____ E-MAIL ADDRESS _____

PREFERRED E-MAILING ADDRESS: BUSINESS ☐ HOME ☐

DUES: \$25.00 per CALENDAR YEAR (January 1 – December 31)

Dues must be received by Dec 31, 2026. Members who miss the December 31st deadline may reinstate their membership after December 31st for the full membership price, as well as a \$15.00 late fee.

New Members: New memberships will be accepted at any time during the year at the \$25.00 rate without a penalty.

☐ New Member ☐ Renewal

Total Enclosed: _____ **Please make your check or money order payable to WCRA,
OR you may renew online for a small convenience fee: <https://wicancerregistrarsassoc.com>**

Please return to:

Tricia Obrecht, CTR
WCRA Treasurer
409 Moe Cir.
Stoughton, WI 53589

SIGNATURE: _____ DATE: _____