



Medical Student Application

FREE
Membership
for Medical
Students

The Radiological Society of North America (RSNA®) is a professional membership organization devoted to developing the highest standards of radiology and related sciences through education and research.

Medical student membership is open to students residing in and enrolled in a medical school in a North American country. Medical Student Members are provided with many valuable benefits, including:

Free online subscriptions



The journal of continuing medical education in radiology



The most clinically relevant, highest-quality science in radiology



Up-to-date news about radiologic research, education and RSNA programs

Free admission to the world's premier radiology meeting



RSNA 2010

PERSONALIZED MEDICINE:
In Pursuit of Excellence

NOVEMBER 28 - DECEMBER 3 • McCORMICK PLACE, CHICAGO

World-class Meeting

World-class City

Free opportunity for continuing education

... Plus much more. See RSNA.org/Membership/benefits.cfm



A personal homepage to store files, bookmarks and searches, accessible from any computer

Find out how RSNA is helping more than 44,000 of your colleagues maintain their professional edge.

Join today. Apply online at RSNA.org/apply.

Medical Student Membership Requirements, Rights and Privileges

Each Medical Student applicant must reside in and be enrolled in a medical school in a North American country. The medical school must be approved by the Liaison Committee for Medical Education or its equivalent.

Medical Student members shall have certain rights and privileges as determined by the RSNA Board of Directors.

Annual Membership Dues

Medical Student Membership (North America)

(Includes individual online only journal access)

(Optional print journals added)

FREE

\$80.00

Membership cycle runs January 1-December 31

Print journal rate good through December 31, 2010

Instructions for Application

Complete the attached application. Please type or print.

Membership application must be received by October 15 in order to attend RSNA 2010 as a member.

- Fill in required information.
- Sign line 5.
- Obtain signature of the dean of your medical school (line 5).
- Forward your completed application to RSNA at the address below.
- Apply online at RSNA.org/apply.

Procedure for Admission

1. Once received, your application will be reviewed by RSNA.
2. You will be notified in 45 to 60 days about your membership status.



Medical Student Membership Application

Please type or print

	<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
RCVD _____	ACKN _____	
Rec Date: ACCTG _____	DM _____	MBR _____
RTG _____	ADM (Mo/Day/Year) _____	
Member Number _____		

1. **First Name:** _____ **Middle:** _____

Last Name (Family name): _____ **Generation (Sr., Jr., II, III, IV):** _____

Degrees to be published (Max. of 2): _____

Birthdate (Mo/Day/Year): _____ Male Female

Spouse/Partner's name: _____ Prefix: _____

2. **Address:**

City: _____ State or Province: _____ ZIP (ZIP+4) Postal Code: _____

Country: _____

3. **Contact Information:**

Phone: _____ E-mail: _____

Fax: _____

4. **Medical Education:**

Medical School: _____

City: _____ State or Province: _____ Country: _____

Date Started (Month/Year): _____ Anticipated Date of Completion (Month/Year): _____

5. **I agree to abide by the current bylaws and any revision thereof:**

I certify that the foregoing statements are true and complete to the best of my knowledge and belief, and understand that any willfully false statement is sufficient cause for rejection of this application or the termination of the membership.

Signature of Applicant

Signature of Dean of Medical School

Date

