



## POLICIES AND PROCEDURES

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**CROSS REFERENCE:** A. 9-10  
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**ISSUED BY:** Board of Directors

**CATEGORY:** STUDENTS

**SUBJECT:** INTERNATIONAL MEDICAL RADIATION TECHNOLOGIST  
STUDENT MEMBERSHIP

**POLICY:** It is the Policy of the Association that students/learners in non-Canadian undergraduate Medical Radiation Technology Programs may become Student Members of the Association.

### OPERATIONAL GUIDELINES:

The applicant must provide proof that they are enrolled in an undergraduate MRT Program.

The applicant will pay the appropriate fee as established by the CEO.

The term of Membership is one (1) year based on the calendar year (1 January – 31 December). *If an applicant is enrolled in a 3 or 4 year Program, they must apply for this Membership each year.*

*Partial year Memberships are not available.*

**PROCEDURE:** The applicant will complete the appropriate application form and submit it with the appropriate payment *in Canadian Funds* to the OAMRT Head Office.

Once the payment has been approved through clearance of the appropriate financial organization, Membership will be granted. The applicant will receive a receipt and proof of Membership for one year which commences 1 January of the year the payment is received and validated.

*As previously indicated in the Operational Guidelines, if an applicant is enrolled in a 3 or 4 year Program, they must apply for this Membership each year.*

*Again, partial year Memberships are not available.*

**MEMBERSHIP  
BENEFITS:**

- *Access to Members' Only section of the Web Site*
- *Ability to purchase OAMRT courses at the Membership Rate*

**EXCLUSIONS:**

*International Medical Radiation Technologist Student Membership applicants are only entitled to the Benefits indicated above and are NOT entitled to:*

- *Membership Benefit Programs*
- *Bursary Awards*
- *DeGroote Courses*
- *OAMRT Professional Recognition Awards*



**ONTARIO ASSOCIATION OF MEDICAL  
RADIATION TECHNOLOGISTS**  
P.O. Box 1054, Brantford, Ontario. N3T 5S7

**APPLICATION FOR INTERNATIONAL MRT MEMBERSHIP**

<b>NAME:</b>	Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/>	<b>DATE OF BIRTH:</b> _____ Day / Month / Year
	_____ (Last Name)	_____ (First Name)
<b>MAILING ADDRESS:</b>		
<b>POSTAL/ZIP CODE:</b>		
<b>PRIMARY E-MAIL ADDRESS:</b>		
<b>DISCIPLINE/ SPECIALTY:</b>	RADIOLOGICAL TECHNOLOGY <input type="checkbox"/>	NUCLEAR MEDICINE <input type="checkbox"/>
	RADIATION THERAPY <input type="checkbox"/>	BASIC RADIOLOGICAL TECHNICIAN <input type="checkbox"/>
<b>OTHER:</b>		
<b>NAME OF PROGRAM / CENTRE:</b>		
<b>NAME OF PRIMARY CLINICAL SITE:</b>		
<b>* MY PROGRAM BEGINS:</b> (Month) _____ (Year) _____		
<b>* I EXPECT TO GRADUATE:</b> (Month) _____ (Year) _____		

**Note: Membership will give access to the Members' Only section of the OAMRT Web Site and allows for the purchase of OAMRT Courses at the Membership rates.**

**DATE:** \_\_\_\_\_  
(Month) (Day) (Year)

**NOTES:**

1. Your E-mail address is your access to the Members Only Section of the OAMRT Web site ([www.oamrt.on.ca](http://www.oamrt.on.ca)), which has a multitude of useful links and information you can utilize. If you change your E-mail address, please notify immediately, the OAMRT Head Office at 1-800-387-4674 Ext. 109.

**FEE:** International Medical Radiation Technologist Membership Fee - \$150.00 (Canadian Funds)

**DECLARATION**

As an International MRT Member of the OAMRT:

- I acknowledge and understand that International MRT Membership does not grant me Canadian Immigrant Status, or Citizenship, or access to a Canadian Work Visa.
- International MRT Membership does Not make me eligible to write the Canadian Association of Medical Radiation Technologist’s Certification Exam.
- I declare that I am a Member of an International Radiation Technology Program.

**NAME:** \_\_\_\_\_  
(First) (Middle) (Last)

**DATE:** \_\_\_\_\_  
(Month) (Day) (Year)

**FEE PAYMENT: Fees must be paid in Canadian Funds by mailing to OAMRT Head Office.**

**Mailing Address: Ontario Association of Medical Radiation Technologists  
P.O. Box 1054  
Brantford, ON  
Canada. N3T 5S7**

**PRIVACY PERSONAL INFORMATION COLLECTION:** The OAMRT collects personal information from Members for the purposes of determining, and maintaining Membership, providing information on OAMRT events, and services, and mailing OAMRT publications. The OAMRT may share this information with the CAMRT and other Provincial Member Associations, for the purposes of verifying, and maintaining Membership records. From time to time, the OAMRT makes its Membership List available to third parties (Association partners) for the following commercial purposes: Job Recruitment Advertising, promotion of Education Activities, and Benefit Services. The lists include Members’ names, and preferred mailing addresses only.

Please check box if you do not want your name made available for the above mentioned commercial services.

Telephone Inquires: OAMRT Head Office - (519) 753-6037 Ext. 109  
Fax: (519) 753-6408