Tumor Registrars Association of

New Mexico

Membership Form

[www.tranm.org](http://www.tranm.org)

<https://www.facebook.com/Tumor-Registrars-Association-of-New-Mexico-2020687094882965/>

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NAME: First and Last Name

ADDRESS: Mailing Address

 Address Line 2

CITY: City

STATE: State

ZIP: Zip Code

EMAIL: Email Address

Affiliation: (please check all that apply)

[ ]  Hospital Registry [ ]  Central Registry [ ]  Contract/Self Employed/Other

I would like to be actively involved by volunteering for:

[ ]  Annual Workshop [ ]  Education Committee

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CHECK ONE:

[ ]  New Member [ ]  Renewal

Make check out to: **TRANM**

**Mail to:** Jennifer L. Sullo

 5023 Calle de Carino Street NE

 Albuquerque, NM 87111

[ ] $25.00 Annual Full Membership Dues

[ ]  $10.00 Student Membership Dues

[ ]  $15.00 Retiree/Inactive Membership Dues

[ ]  $20.00 Associate Membership Dues

[ ]  $10.00 Late Fee (After March 31, 2022)

[ ]  $5.00 State Basket Donation

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