



## Application for Membership

**First Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_

Position / Title \_\_\_\_\_

Office / Hospital / Business Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Home Address / Mailing address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

**Preferred Email Address** \_\_\_\_\_

### EDUCATION/PROFESSIONAL EXPERIENCE

Degrees	Institution	Dates
_____	_____	_____
_____	_____	_____

Residency Training (Field)	Institution	Dates
_____	_____	_____
_____	_____	_____

Fellowship Training (Field)	Institution	Dates
_____	_____	_____
_____	_____	_____

If currently in Fellowship - Post Fellowship Plans \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Special Interests / Main area of Neuroradiology Focus**

(Diagnostic, Interventional, Pediatric, Head and Neck, etc.)

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**Provincial Royal College medical license**

Province of licensure \_\_\_\_\_ Dates Valid \_\_\_\_\_

**MEMBERSHIP CATEGORIES**

**Full Member**

Annual fee per calendar year - \$400 (Canadian)

Full Member applicants must be physicians certified in Neuroradiology by the Royal College of Surgeons of Canada or have completed at least one year of Neuroradiology subspecialty training and have a focus on neuroradiology in their clinical practice. OR a person holding certification in Diagnostic Radiology and expertise and focus in Neuroradiology.

**Junior Member** Year of residency: \_\_\_\_\_ OR Fellowship year \_\_\_\_\_ of \_\_\_\_\_  
Annual fee per calendar year - \$80 (Canadian)

Junior Member applicants must be registered in a Canadian neuroradiology residency training program, or in fellowship training in neuroradiology, or a related subspecialty fellowship, recognized by the Royal College of Surgeons of Canada. Upon successful completion of a neuroradiology training program and/or fellowship training, Junior members will be promoted to Full Member status.

**Associate Member**

**Specialty / Field** \_\_\_\_\_  
Annual fee per calendar year - \$250 (Canadian)

Associate Member applicants are Diagnostic Radiologists, MDs or PhDs, or other well-qualified workers in allied fields of medicine, who are interested in the study of neuroradiology, but do not qualify for Full membership.

**Protection of Privacy Information**

The CNSF complies with the principles of the Personal Information Protection and Electronic Documents Act (PIPEDA). We will use the personal information collected on this form for processing your membership application. Once it is approved, unless you advise the secretariat office otherwise, we will use your contact information to disseminate CNSF, and CNSF Congress information, disseminate society information, and conduct society business. We do not loan, sell or rent our member lists for financial gain.

Please submit completed application form to CNSF Member Services [donna-irvin@cnsf.org](mailto:donna-irvin@cnsf.org)