



NORTH CAROLINA SOCIETY OF HISTOTECHNOLOGY

2021 Membership Fee \$25

Save paper! This form can be completed (and payment submitted via PayPal) online:
<http://www.ncsh.info/become-a-member.html>

Name (First and Last):

Date:

Email Address:

****This email will be used for all NCSH related communications & included in the membership directory****

Employer (School):	
Employer Address:	
City, State, Zip:	
Phone:	

Optional

Home Address:	
City, State, Zip:	
Phone:	

Please check all that apply:

Field:

- Clinical
 Research
 Supervisor/Manager

Certifications:

- HT
 HTL
 Other

Years in the Field:

- 0 – 5 16 – 20
 6 – 10 21 – 24
 11 – 15 25+

- I am interested in volunteering for NCSH
 I am a current NCSH member
 I am a current student
 I am a new member

I was recommended by (name and email: _____

Make checks payable to: NCSH
Mail completed form and payment to:
Otis Lyght, NCSH Treasurer
1900 Neville Rd, Chapel Hill NC 27516
