All members of PA-PNA are required to complete this registration form. Indicate any changes; Membership runs from September I, 2019-August 31, 2020.

## NEW MEMBERSHIP RENEWAL Changes for directory or membership? SECTION I: MEMBER CONTACT INFORMATION

| TITLE      | ∏Mr | Mrs | Miss | Ms |               |  |
|------------|-----|-----|------|----|---------------|--|
| NAME       |     |     |      |    |               |  |
| ADDRESS I  |     |     |      |    | School Name   |  |
| ADDRESS 2  |     |     |      |    |               |  |
| ADDRESS 3  |     |     |      |    |               |  |
| TOWN/CITY  |     |     |      |    | Telephone #   |  |
| ZIP CODE   |     |     |      |    | PRIMARY EMAIL |  |
| JOB TITLE: |     |     |      |    |               |  |

## SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS

PLEASE VISIT THE PA-PNA WEBSITE FOR A COMPLETE DESCRIPTION OF EACH MEMBERSHIP. https://www.pa-pna.org/membership

| MEMBER TYPE       | DESCRIPTION   | MEMBERSHIP<br>DUES<br>(Annual) | Please<br>Check |
|-------------------|---|--------------------------------|-----------------|
| FULL              | <b>Full Membership</b> requires an individual to be a<br>Dean, Director, Chair or Coordinator of a Practical<br>Nursing Program in the Commonwealth of<br>Pennsylvania. Assistant Deans, Directors, Chairs<br>or Coordinators will also be considered for<br>membership. Full members also have the privilege<br>of having their faculty members attend the<br>educational conferences. | \$125                          |                 |
| LIFETIME          | Lifetime Membership is open to previous<br>members who have retired yet would like to<br>maintain membership in the organization. Life<br>members can attend conferences and meetings but<br>cannot hold office, make motions or vote.  | \$0                            |                 |
| HONORARY          | Honorary membership is available for those who<br>have demonstrated an interest in practical nursing<br>advocacy and education. These members are<br>nominated and voted for membership by Full<br>members.   | \$0                            |                 |
| ASSOCIATED        | Associated membership is available to a Dean,<br>Director, Chair or Coordinator of a Practical<br>Nursing Program and, if applicable, the Assistant<br>Deans, Directors, Chairs or Coordinators outside<br>of the Commonwealth of Pennsylvania. This<br>member can address issues but cannot vote.  | \$93.75                        |                 |
| PAYMENT<br>METHOD | Personal Check 🔲 Institutional Check  |                                | L]              |

SECTION 3: PAYMENT

Please submit Payment by September 1, 2020 The only method of payment currently is check by mail.

Please make check payable to Pa-PNA

Send to: PA-PNA c/o Tim Campbell, Interim Treasurer

1339 St. Mary St.

Lewisburg, PA 17837