



NATIONAL BLACK NURSES ASSOCIATION, INC.

Suffolk County Black Nurses Association (183)

Jacqueline Winston

PO Box 541

Ridge, New York 11961

Ph: (516) 983-4668; E-Mail: suffolkcountybna@hotmail.com

2020 MEMBERSHIP APPLICATION

NBNA 20 x 20 Campaign

Each member must complete a separate membership application and submit both with payment at the same time.

Please type or write legibly, this information must be readable.

I am a: ☐ RN ☐ LPN ☐ Retired member ☐ 1st Year Grad ☐ Student

☐ Lifetime: Year joined: _____

Name _____ ☐ Renewing ☐ New

I am a: ☐ RN ☐ LPN ☐ Retired member ☐ 1st Year Grad ☐ Student

Name _____ ☐ New ☐ Reclaimed

APPLICANT'S INFORMATION: Nursing Credentials: _____

WORK AFFILIATION: _____

Recruited by: _____

Address:		City:		State:		Zip:	
Phone:		Cell:		E-Mail:			
Nursing License #:		State:					

EXPERIENCE IN NURSING	PRIMARY WORK SETTING	PRIMARY ROLE	HIGHEST DEGREE HELD	NOTE: Your responses for age and salary will remain confidential.	
1. Less than 2 years	1. Private Non-Profit Hospital	1. Adm/Dir./VP of Nursing	1. Associate Degree	AGE RANGE	
2. 2 - 5 year	2. Public/Federal Hospital	2. Nurse Manager	2. Baccalaureate in Nursing	1. 20-24	6. 45-49
3. 6 - 10 years	3. Private, Investor-Owned Hospital	3. Assistant Nurse Manager	3. Another Baccalaureate	2. 25-29	7. 50-54
4. 11 - 15 years	4. School/College of Nursing	4. Adv Practice Nurse	4. Master's in Nursing	3. 30-34	8. 55-59
5. 16 - 20 years	5. Independent/Private Practice	5. Researcher	5. Another Master's	4. 35-39	9. 60-64
6. More than 20 years	6. Military	6. Consultant	6. Doctorate in Nursing	5. 40-44	10. 65 plus
LEVEL OF CARE PROVIDED			PROFESSIONAL ORGANIZATION MEMBERSHIP	ANNUAL SALARY	
1. In-patient	7. Industry	8. Case Manager	1. American Nurses Association	1. UNDER \$20,000	
2. Out-patient Ambulatory	8. Home Health Agency	9. RN	2. American Association of Critical Care Nurses	2. \$20,000 - \$29,999	
3. Public Health Department	9. Behavioral Care Company/HMO	10. LPN/LVN	3. National League for Nursing	3. \$30,000 - \$39,999	
4. Nursing Home	10. Community Agency	11. Professor	4. Chi Eta Phi	4. \$40,000 - \$49,999	
5. Residential	11. Research	12. Associate Professor	5. American Public Health Association	5. \$50,000 - \$59,999	
6. Rehabilitative	12. Nursing Home	13. Assistant Professor	6. American Academy of Nursing	6. \$60,000 - \$69,999	
NURSE PROFILE	Nursing Specialty, i.e., ER, OR	SEX		7. \$70,000 - \$79,999	
1. ANA Certified		1. Female	7. Other:	8. \$80,000 - PLUS	
2. Generalist (RN, C)	NURSING EMPLOYMENT	2. Male			
3. Specialist (RN, CS)	1. Full-time 3. Retired				
4. Prescriptive Authority	2. Part-time 4. Unemployed				

Dues Structure: NATIONAL and LOCAL DUES both Must be Paid in FULL to be a Member in Good Standing

Regular National Dues RN \$225.00	Regular National Dues LPN/LVN \$175.00	Regular National Dues Retired \$100.00	Regular National Dues 1 st Year Grad \$150.00	Regular National Dues Student (unlicensed SN \$50.00)	Reg. National amount \$
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USE THE COLUMNS BELOW ONLY IF YOU ARE RECRUITING A NEW OR RECLAIMED MEMBER

National Dues RN - \$160.00	National Dues LPN/LVN - \$125.00	National Dues Retired - \$100.00	National Dues 1 st Year Grad - \$150.00	National Dues Student (unlicensed SN \$35.00)	National amount \$
Local Dues RN - \$40.00	Local Dues LPN/LVN - \$40.00	Local Dues Retired - \$30.00	Local Dues 1 st Year Grad - \$20.00	Local Dues Student unlicensed SN \$10.00	Local amount \$
Lifetime Local Dues \$25.00	or become a NEW Lifetime Member - 4 installments of \$500.00 within a one-year period.				Lifetime amount \$
				TOTAL AMOUNT DUE	\$

METHOD OF PAYMENT:

☐ Check ☐ Money Order ☐ VISA ☐ Master Card Expiration Date: ____/____/____ Sec. Code: ____

Account #:

Signature:

THANK YOU FOR YOUR INTEREST IN NBNA