

Greetings! Every day is an exciting day in the life of an RN! Whether you are completing another year as an educator, or are new graduate nurses preparing to enter the workforce, we’d like to take this opportunity to invite you to consider membership in the Iowa League for Nursing (ILN)!

Although we are currently a small organization, our message is strong and our mission clear. The ILN, a Constituent League of the National League for Nursing (NLN), is the voice of nursing education today.

* We work toward improving nursing education through scholarships, research, and evidence-based practice.
* We provide several scholarships annually to deserving students and faculty.
* We serve to disseminate information regarding upcoming programs and educational opportunities for nurse educators across the nation.
* NLN membership allows us to access the Journal of Nursing Education, providing us with the latest information and research regarding education in our field. (ILN and NLN membership are separate and not dependent upon each other).

**Current students can join the Iowa League for Nursing for a $10 membership fee!** Join us today!

* You will be informed of national and statewide endeavors through newsletters and minutes from meetings.
* You will be contributing to ongoing nursing education through scholarships
* You will gain a voice in a professional organization.

**MEMBERSHIP APPLICATION/RENEWAL FORM (Please print clearly.)**

**Name**

**Mailing Address   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    State \_\_\_\_  Zip \_\_\_\_\_**\_

**Daytime Phone                                      Cell Phone**

**Email \_\_\_                                                              Alternative email address**

**Employer                                                                         Position**

**I agree to have my information shared with members via Membership Directory. Yes No**

**I would be willing to serve the organization as: (Check as many as you are interested in)**

 ***Officers*                    *Other positions*          *(position descriptions can be found on the ILN website****)*

# \_\_     President-elect (2020)   \_\_ Member Director    \_\_ Nominating Committee

# \_\_ Membership Committee \_\_ Secretary (2020)           \_\_ Finance Committee   \_\_ Strategic planning

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**\_\_ Treasurer (2020) \_\_ Scholarship Committee \_\_ Website/FaceBook coordinator**

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**I was referred to the ILN by:                                                                      (Name of referring member.)**

**Please remit your 2020 membership fee (along with this form) by check payable to:   Iowa League for Nursing**

**(Or renew with Paypal at the website above). 1414**

**Membership fees:**

**\_\_\_\_\_$350 Lifetime Membership           \_\_\_\_\_$10 Student Membership (annual)    \_\_\_\_\_$40 1 Yr Membership**

**\_\_\_\_\_$75 2 Yr Membership \_\_\_\_\_ $110.00 3 Yr Membership \_\_\_\_\_$145.00 4 Yr Membership**

**\_\_\_\_\_$180.00 5 Yr Membership** **­­­**

**Optional Scholarship fund donation\_\_\_\_\_\_\_\_**