



PHILIPPINE NURSES ASSOCIATION OREGON / WASHINGTON

Membership Form

Mailing Address: 6095 SW Sequoia Drive, Tualatin, Oregon 97062

Name/Title _____ Birthday _____

Mailing Address _____ City _____ State _____ Zip _____

Home Phone ____ (____) _____ Work Phone ____ (____) _____ Cell Phone ____ (____) _____

Home E-mail _____ @ _____ Work E-mail _____ @ _____

Employer _____ Position/Specialty _____

Special Skills/Hobbies _____

School of Nursing _____ Year of Graduation _____

Province or State of Origin _____

Please indicate the committee(s) of your interest:

Education
By-laws/Legislative
Finance/Ways & Means
Publication

Cultural/Social Affairs
Hospitality
Membership/Nominations
Community Outreach

New Member
Regular Member- \$35.00
(Filipino RN)

Membership Renewal
Affiliate Member- \$15.00
(Student Nurse, LPN, CNA, other Ethnic RN)

If new member, recruited by: _____

Signature _____ Date: _____

Please send completed membership form to: PNA– Oregon/Washington
6095 SW Sequoia Dr., Tualatin, OR 97062

TOGETHER WE CAN MAKE A DIFFERENCE!