



NATIONAL BLACK NURSES ASSOCIATION, INC.

# 2022 NEW/MEMBERSHIP APPLICATION

**Southeastern Pennsylvania Area Black Nurses Association (56)**  
**Monica Harmon, President**

PO Box 4971  
Philadelphia, PA 19119

New    Renewing    Lifetime member, year you became a LT member: \_\_\_\_\_

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

Name: \_\_\_\_\_ Credentials: \_\_\_\_\_  
 RN    LPN/LVN    Retired member    1<sup>st</sup> Year Grad    Student

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Nursing License #: \_\_\_\_\_

State: \_\_\_\_\_

Work Affiliation: \_\_\_\_\_

Recruited by: \_\_\_\_\_

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	<b>AGE RANGE</b>
2. 2 - 5 year	2. Public/Federal Hospital	2. Nurse Manager	2. Baccalaureate in Nursing	
3. 6 - 10 years	3. Private, Investor-Owned	3. Assistant Nurse Manager	3. Another Baccalaureate	1. 20-24      6. 45-49
4. 11 - 15 years	Hospital	4. Adv Practice Nurse	4. Master's in Nursing	2. 25-29      7. 50-54
5. 16 - 20 years	4. School/College of Nursing	5. Researcher	5. Another Master's	3. 30-34      8. 55-59
6. More than 20 years	5. Independent/Private Practice	6. Consultant	6. Doctorate in Nursing	4. 35-39      9. 60-64
<b>LEVEL OF CARE PROVIDED</b>	6. Military	7. Educator	Other:	5. 40-44      10. 65 plus
1. In-patient	7. Industry	8. Case Manager	<b>PROFESSIONAL ORGANIZATION</b>	<b>ANNUAL SALARY</b>
2. Out-patient Ambulatory	8. Home Health Agency	9. RN	<b>MEMBERSHIP</b>	1. UNDER \$20,000
3. Public Health Department	9. Behavioral Care Company/HMO	10. LPN/LVN	1. American Nurses Association	2. \$20,000 - \$29,999
4. Nursing Home	10. Community Agency	11. Professor	2. American Association of Critical Care Nurses	3. \$30,000 - \$39,999
5. Residential	11. Research	12. Associate Professor	3. National League for Nursing	4. \$40,000 - \$49,999
6. Rehabilitative	12. Nursing Home	13. Assistant Professor	4. Chi Eta Phi	5. \$50,000 - \$59,999
<b>NURSE PROFILE</b>	<b>Nursing Specialty, i.e., ER, OR</b>	14. Staff	5. American Public Health Association	6. \$60,000 - \$69,999
1. ANA Certified	<b>NURSING EMPLOYMENT</b>	<b>SEX</b>	6. American Academy of Nursing	7. \$70,000 - \$79,999
2. Generalist (RN, C)	1. Full-time      3. Retired	1. Female	7. Other:	8. \$80,000 - PLUS
3. Specialist (RN, CS)	2. Part-time      4. Unemployed	2. Male		
4. Prescriptive Authority				

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

National Dues RN - \$160.00	National Dues LPN/LVN - \$125.00	National Dues Retired - \$100.00	National Dues 1 <sup>st</sup> Year Grad - \$150.00	National Dues Student (unlicensed SN \$35.00)	National amount \$
Local Dues RN - \$50.00	Local Dues LPN/LVN - \$50.00	Local Dues Retired - \$50.00	Local Dues 1 <sup>st</sup> Year Grad - \$50.00	Local Dues Student unlicensed SN \$00.00	Local amount \$
Become a NEW Lifetime Member - 4 installments of \$500.00 within a one-year period plus \$50.00 for Local Dues.					Lifetime amount \$
					<b>TOTAL AMOUNT DUE</b> \$

**METHOD OF PAYMENT:** is the credit card associated with the address listed above, if NO type or write the address below

Check    Money Order    VISA    Master Card   Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_   Sec. Code: \_\_\_\_\_

Account #: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

**THANK YOU FOR YOUR INTEREST IN NBNA**