Nurse Practitioners New Zealand



A division of the College of Nurses Aotearoa (NZ) Inc PO Box 1258 Palmerston North 4440 +64 6 358 6000 admin@nurse.org.nz www.nurse.org.nz/npnz

NPNZ Membership Application

College of Nurses Aotearoa (NZ) Inc members who are Nurse Practitioners receive full membership to the NPNZ division at no charge – please post or e-mail completed application form to the address above.

If you wish to become a member of College of Nurses Aotearoa (NZ) please apply online via https://www.nurse.org.nz/online-membership-application,user,edit.html and also complete this form for NPNZ membership. Non College of Nurses Aotearoa (NZ) Inc member fees:

- * Application fee of \$30.00 (on joining)
- * NPNZ annual membership fee of \$200.00 (Invoices are e-mailed annually) NPNZ membership gives you free attendance to at least two NPNZ meetings per year, discount for NPNZ conference, access to online forum, links to local special interest and regional NP groups)

Please Note: There is no professional indemnity insurance cover provided with NPNZ Membership

Please write clearly -

Items indicated with an asterix will show on the NPNZ page of the College of Nurses (Aotearoa) NZ website

All contact details including e-mail and phone numbers	are requi	red for	College of I	lurses & NF	NZ office use on	ly	
Title							
Family Name*							
First Name *							
Gender							
Date of Birth							
Ethnic Group							
Year first registered as NP (in NZ)							
APC No.							
i.e., Primary Health Care, Emergency Care (all ages), Neonatal, Ophthalmology, Renal, Education, etc. Region employed in within NZ*							
Current Employer							
Currently Unemployed (Please tick)							
CNA(NZ) Member Please provide membership number	Yes		Membe	er No.		No [
Home Postal Address – Line 1							
Line 2							
Town/City & Post Code							
E-mail Address							
Telephone - Cell							
- Home							
Areas of Interest i.e., research, mentoring, legal issues, education, media. policy/quideline development or review							

Demographic data is for research purposes only – NPNZs demographic data may be shared with third party researchers, i.e., NPIs undertaking primary research (questionnaires) of our members, university researchers, Nursing Council New Zealand or government agencies.

ignature of Applicant:					
Date:					
Payment Details:					
Online payment – please pay into the College of Nurses account: 02 0719 0193130 000					
Date of payment/					
Payment reference details must include your "Name" and "NPNZ new".					

Please post or email your completed form to NPNZ - address above.



NPNZ is a division of the College of Nurses Aotearoa (NZ) Inc - CNA(NZ)

College of Nurses Membership is available to all Registered Nurses and Nurse Practitioners, all information and frequently asked questions for membership can be found on the College of Nurses website www.nurse.org.nz or phone (06) 358 6000