

# Mercer County Community College Student Nurses' Association

1200 Old Trenton Road  
West Windsor, NJ 08550

## 2014-2015 Membership Application

Please complete all information – DO NOT staple or tape payment to the application

MCCC SNA DUES:

One Semester Membership: \$12.50

One Year Membership: \$25.00      Two Year Membership: \$50.00

Please select one of the following:

One Semester

One Year

Two Year

Renewal

First Name

Last Name

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Mailing Address (Do not abbreviate)

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City

State

Zip Code

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Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

Graduation Date: (mm/yyyy) \_\_\_\_\_/\_\_\_\_\_ Gender: Male  Female

Are you presently an RN? Yes  No

Are you an NSNA member? Yes  No

If yes, NSNA Member #: \_\_\_\_\_

AMOUNT DUE: \$ \_\_\_\_\_

METHOD OF PAYMENT:  CHECK (No.\_\_\_\_)     CASH             MONEY ORDER

Please make checks payable to: Mercer County Community College SNA

Applicant's Certification: I am eligible and am applying for Mercer County Community College Student Nurses' Association. I AM CURRENTLY ENROLLED OR AM SEEKING ENROLLMENT IN A NURSING PROGRAM AND HAVE PAID MY TUITION.

I certify that all statements made in this application are complete and accurate. I understand that:

- Falsification in my application will disqualify my application.
- Failure to follow instructions on this application will render my application incomplete.
- INCOMPLETE APPLICATIONS WILL BE RETURNED WITHOUT PROCESSING.

Print Name: \_\_\_\_\_

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

Please turn in application to any SNA advisors office or to the treasurer and make sure the application and dues are in an envelope with your name on it.