



CSULB CNSA Membership Application

CNSA Use ONLY:	
Paid:	<input type="radio"/> Cash <input type="radio"/> Check #: _____
Date:	_____
Initials:	_____

Name: _____ Date: _____

Email: _____ Student ID #: _____

Address: _____

City: _____ Zip: _____ Phone: _____

Program (check one): PRE-NURSING SEMESTER TRIMESTER
 ADN-BSN MASTERS DOCTORATE

CURRENT Semester in Nursing (check one): 1st 2nd 3rd 4th 5th N/A

Expected Graduation Year: May _____ August _____ December _____

1st semesters only: I am interested in receiving a nursing mentor. YES NO

3rd semesters and up only: I am interested in mentoring a 1st/2nd semester. YES NO

One-Time CSULB CNSA Membership Fee: \$15.00 (\$3.00 per semester)

To pay online, navigate to the following website: <http://bit.ly/CSULBCNSAMembership> or scan the QR code above. Then, submit this form and proof of payment (CashNET receipt) to the CNSA Membership Director at the email below.

_____ By initialing here, I acknowledge that I have paid the one-time CSULB CNSA membership fee.
 Initials

CNSA Member Benefits

- Mentoring from senior nursing students
- Expanded support system within the nursing department
- Enhanced professional relationships with faculty
- Leadership experience opportunities
- Professional organization for your resume, scholarships, and award applications
- Unique community service opportunities
- Statewide CNSA conventions
- Discount on CSULB nursing apparels
- Honor cord and honor medal recipient

NSNA Member Benefits

- Malpractice insurance
- Health insurance
- Verizon wireless program
- NSNA credit card program
- Scholarship programs
- Discounts at Office Depot and much more!
- Receive *Imprint* magazine
- National conventions and conferences

For more benefits of national membership, check out their website: www.nсна.org

Questions? Contact the Membership Director at: cnsa.csulb.membershipdirector@gmail.com