

Suggested topics for future workshops

Are you interested in hosting a study day?

Yes/No

Name: _____

Contact details: _____

Please Note:

The **completed form** should be **returned** to the PaNA Treasurer, **regardless of payment method.**

PaNA Treasurer
c/- ANMF (Vic Branch)
Box 12600 A'Beckett Street PO
MELBOURNE VIC 8006

For all **on-line banking transactions** please e-mail your details to the PaNA Treasurer at

records@anmfvic.asn.au



This form current as at July 2016

PreAdmission Nurses Association

Special Interest Group
ANMF (Vic Branch)



Renewal/ Membership Form

All memberships need to be renewed in July each year

MISSION STATEMENT

To provide a forum that facilitates communication and discussion, addresses problem solving and encourages professional development for nurses working in the area of pre-admission within Australia

WORKSHOPS

- ★ Workshops are held 3 times per year
- ★ Workshop attendance contributes towards CPD points as defined by the Nursing and Midwifery Board of Australia
- ★ A Certificate of Attendance is provided
- ★ Speakers at workshops are specialists working in the clinical area
- ★ Workshops are held at different hospitals throughout Victoria

MEMBERSHIP

- ★ Full membership is open to all nurses who are financial members of the Australian Nursing Federation who are interested in or engaged in the practice of preadmission nursing
- ★ Associate membership is open to all nurses who wish to attend a PaNA workshop

BENEFITS

- ★ Attendance to all PaNA workshops is free to members of the PaNA SIG
- ★ The PaNA SIG is committed to achieving and promoting the professional, educational and economic interest of nurses engaged in Preadmission nursing
- ★ To provide a forum for the sharing of information and ideas between members to facilitate mutually beneficial outcomes
- ★ To facilitate participation in special projects and research, complementary to raising awareness and issues and emerging trends relevant to members

APPLICATION

Please complete and return to address below

Name _____

Address _____

_____ P/C _____ - _____

Phone / Mob _____

Email _____

Workplace _____

ANMF Member No _____

Date _____

I wish to become a member/renew my membership of the PreAdmission Nurses Association

Full Membership: \$50.00

Non member workshop attendance: \$60.00

All fees include GST

Please note: Payment can be made via bank transfer / cheque / cash

Banking details:

PreAdmission Nurses Association

BSB: 633-000

Account Number: 121178230

If payment is by bank transfer, please include your name in the reference section

Please make cheque/postal order payable to:

PreAdmission Nurses Association ANMF (Vic Branch) and send to:

PaNA Treasurer

c/- ANMF (Vic Branch)

Box 12600 A'Beckett Street PO

MELBOURNE VIC 8006