



Canadian Indigenous Nurses Association (C.I.N.A.)

Suite 1004, 1 Nicholas Street, Ottawa, ON, K1N 7B7
Tel: (613) 724-4677 • Toll free: (866) 724-3049 • Fax: (613) 724-4718
• Website: www.indigenournurses.ca

PROFESSIONAL ORGANIZATION MEMBERSHIP APPLICATION

Contact Name:			
Organization Name:			
Address:			
Contact #:		Email:	

Professional organization membership is valid from April 1, 2021 to March 31, 2022.

Cost for organizational membership is \$1,200 per year and includes:

- 1 job posting or informational posting on the C.I.N.A. website for a one-month period

Please select method of payment below.

Cheque/Money order enclosed (*make cheque payable to the Canadian Indigenous Nurses Association*)

Credit Card

Name on Card: _____

Card Type: Visa Mastercard

Card number: ____ / ____ / ____ / ____

Exp date: ____ / ____ CCV2: ____

Cardholder Signature: _____

Date: _____

OFFICE USE ONLY

DATE # _____ APPROVAL # _____ RECEIPT # _____ PROCESSED BY _____