# Nurse Practitioners New Zealand

### 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 Associate Membership Application (For NPIs, Overseas NPs and Alumni)

For College of Nurses Aotearoa (NZ) Inc members who are Nurse Practitioner Interns (see below for definition), associate membership to the NPNZ division is free – please post or e-mail completed form to the address above.

If you wish to become a member of College of Nurses Aotearoa (NZ) please apply online via <a href="https://www.nurse.org.nz/application.html">https://www.nurse.org.nz/application.html</a> and also complete this form for Associate NPNZ membership.

## Non College of Nurses Aotearoa (NZ) Inc member fees:

- \* Application fee of \$30.00 (on joining)
- \* Associate NPNZ membership fee \$50.00 (per calendar year)
  Associate NPNZ membership allows you to attend two meetings within the year (does not include travel costs), provides discount for the NPNZ conference (held bi-annually), access to the NPNZ online forum, links to local special interest groups (SIG) and regional NP groups.
  Once you are registered as an NP then full NPNZ membership is \$200 per annum for non College of Nurses members (tax invoices are e-mailed annually).

**Please Note:** There is no professional indemnity insurance cover provided with Associate or full 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 required for College of Nurses & NPNZ office use only

| Title   |     |            |    |
|---|-----|------------|----|
| Family Name*  |     |            |    |
| First Name *  |     |            |    |
| Gender  |     |            |    |
| Date of Birth   |     |            |    |
| Ethnic Group  |     |            |    |
| Annual Practicing Certificate No.                     |     |            |    |
| (if registered in NZ) or Overseas equivalent          |     |            |    |
| Current Area of Practice*                             |     |            |    |
| i.e., Primary Health Care, Emergency Care (all ages), |     |            |    |
| Neonatal, Ophthalmology, Renal (adults only), etc.    |     |            |    |
| Region employed within NZ*or                          |     |            |    |
| Country if overseas or write retired if               |     |            |    |
| Alumni  |     |            |    |
| Current Employer                                      |     |            |    |
| Current Job Title                                     |     |            |    |
| Current Education Institution                         |     |            |    |
| CNA(NZ) Member Please provide membership number       | Yes | Member No. | No |

| Home Postal Address – Line 1                        |  |
|---|--|
| Line 2  |  |
| Town/City & Post Code & Country                     |  |
| Telephone - Cell                                    |  |
| - Home  |  |
| E-mail address                                      |  |
| Areas of Interest                                   |  |
| i.e., research, mentoring, legal issues, education, |  |
| media, policy/guideline 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.

| Signature of Applicant:    |   |
|----------------------------|---|
| Date:                      |   |
| Payment Details: \$80.00 ເ | pon applying (includes application and annual fee)          |
| Online payment – please į  | 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 NZ Registered Nurses and NPs, all information and frequently asked questions for membership can be found on the College website <a href="www.nurse.org.nz"><u>www.nurse.org.nz</u></a> or phone (06) 358 6000

**Definition of Nurse Practitioner Intern** from NPNZ's perspective is someone who is:

- A New Zealand registered nurse enrolled in their final year of the Master of Nursing (Clinical)
  degree in New Zealand and with the plan to gain Nurse Practitioner registration at the end of that
  same year.
- Or, a registered nurse with a current role/job description of a Nurse Practitioner Intern in New Zealand (they may or may not already have NP registration overseas).