



## Pennsylvania Developmental Disabilities Nurses Network Individual Membership Form

Membership year runs from January 1, 2010 to December 31, 2010.

Please check one box below:

- Annual Individual Membership is \$30.00.
- Annual Individual Membership for Retired Nurses is \$25.00.
- Annual Individual Membership for Student Nurses is \$25.00.

**Membership is for the individual and is not transferable (if a nurse leaves your organization their membership goes with them.)**

Please complete form and submit with payment.

**(This form and your canceled check is your receipt of payment.)**

**\* \$20.00 service fee for any returned check.**

Please complete *(print)*:

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

Licensure/Credentials: \_\_\_\_\_

Preferred Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Is this address home \_\_\_\_\_ or work \_\_\_\_\_?

Employer/School: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_

E-mail address: \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_

Please check one of the following choices: Help us cut mailing costs and use email.

- Send all information via regular mail
- Send all information via e-mail

**MAKE CHECKS PAYABLE TO: PADDNN**

**SEND TO: MELODY WOLF  
315 STANTON STREET  
SOUTH WILLIAMSPORT, PA 17702**