



PALLIATIVE
CARE
NURSES
AUSTRALIA
INC

Palliative Care Nurses Australia Inc.

Membership Application Form

'Striving for excellence in palliative care nursing through leadership, representation and professional support'

In 2003, a small group of palliative care nurses, led by Professor Margaret O'Connor, identified the need for a national palliative care nursing organisation. Initial seeding funding and administrative assistance from Palliative Care Australia enabled this to become a reality.

Palliative Care Nurses Australia Incorporated (PCNA) was officially launched at the PCNA National Conference in August 2005. PCNA holds a national palliative care nursing conference every second year, following the very successful inaugural conference held in Melbourne in 2006.

Membership is available to any nurse employed in palliative care or any person who has an interest in palliative care nursing. Office Bearers and Committee Members are elected at the Annual General Meeting.

AIMS:

- To promote palliative care nursing in a changing environment
- To encourage participation in local, national and international palliative care nursing activities
- To foster the sustainability of the nursing workforce in palliative care
- To promote professional development of nurses caring for people with a life limiting illness
- To provide opportunities for collaboration and networking among members
- To facilitate knowledge, research, education and policy in palliative care
- To inform policy in palliative care

WHAT CAN I EXPECT FROM MEMBERSHIP?

- Online access to International Journal of Palliative Nursing
- Monthly e-news
- Participation in online forums
- Opportunity to join national committee and sub-committees
- Opportunity to contribute to the development of palliative care nursing in Australia
- Opportunity to network with other palliative care nurses
- Discounts to PCNA Conference and education events; discount to PCNNZ Conference

YEARLY SUBSCRIPTIONS (GST INCLUSIVE) For more information on our membership types, please visit our website at www.pcna.org.au

- \$100.00 - Ordinary Member
- \$80.00 - Associate Member
- \$250.00 – Corporate Partners

SAVE TIME ... PAY FOR 2 YEARS MEMBERSHIP NOW

Our Mission...

'To promote excellence in palliative care nursing in Australia through leadership, representation and professional support'



Palliative Care Nurses Australia Inc.

Level 1, Suite 375, 241 Adelaide Street BRISBANE Q 4000

Phone: 07 5429 8480 | Fax: 07 5429 8486 | Email: admin@pcna.org.au | Web: www.pcna.org.au



Palliative Care Nurses Australia Inc. Membership Application Form

'Striving for excellence in Palliative Care Nursing through Leadership,
Representation and Professional Support'

Full Name	
Address	
Preferred phone contact	
E-mail Address	
Current place of work	
What is your role there?	
Membership Type (please note prices are inclusive of GST). For information on our membership types, please visit our website www.pcna.org.au	<input type="checkbox"/> Ordinary Member (\$100) <input type="checkbox"/> Associate Member (\$80) <input type="checkbox"/> Corporate Partners (\$250) <input type="checkbox"/> I would like to pay for 2 years' membership
Can you recommend a friend who might be interested in joining PCNA?	
Friend's Full Name	
Friend's E-Mail Address	
Are you interested in being involved in any of the following PCNA Sub Committees?	<input type="checkbox"/> Marketing & Communication (website, e-news, membership) <input type="checkbox"/> PCNA Conference (Event planning and organising) <input type="checkbox"/> Finance (Budgeting and general financial management) <input type="checkbox"/> Governance (Constitution, roles and responsibilities)

PAYMENT OPTIONS - ABN 46 636 371 585

VISA / MasterCard Cheque (*payable to PCNA Inc.*) Direct Deposit Online at www.pcna.org.au

DIRECT DEPOSIT DETAILS - *Account Name: PCNA Inc. BSB: 065-140. Account No. 1013 1491.*

Please use your *full name* as the payment reference. Please either fax or email payment confirmation / or credit card details to admin@pcna.org.au or 07 5429 8486. Please post cheques to PCNA Inc. Level 1, Suite 375, 241 Adelaide Street, Brisbane Q 4000.

CREDIT CARD DETAILS

Cardholder's name _____

Card Number

Expiry date / CSV

Payment Amount \$ _____ Signature _____