



Membership Invitation
 545 Mainstream Dr. Suite 405
 Nashville, TN 37228



TNA-ANA

- ▶ Protect nursing practice
 - ▶ Promote unity among nurses
 - ▶ Promote nursing careers
 - ▶ Promote excellence in practice with peer recognition awards
 - ▶ Represent nursing and secure nursing appointments on policy-making boards and commissions
- ▶ Provide cutting edge information
 - ▶ Develop and introduce legislation to increase health care access, protect public, enhance nursing practice, and promote wellness
 - ▶ Provide more than 100 other benefits from insurance discounts to job placement

Promoting Health Care Reform: TNA-ANA are Nursing's Safety Net

**A Special Invitation from
 TNA President Lena Patterson**

We are in the midst of the greatest health care overhaul in the history of America. As trusted patient advocates, nursing professionals must be among the nation's healthcare providers at the forefront leading change.



We Demand:

- ▶ Quality affordable health care for all Americans.
- ▶ Unnecessary barriers to nursing practice be removed so that we can help provide health care to the millions of families that "have not."
- ▶ That Americas' largest group of health care providers, professional nurses, have a voice in the future of health care.

These are ambitious goals for an association that doesn't come close to matching the membership resources of other health care associations, insurance companies and other forces, which continually challenge our efforts.

One person CAN make a difference. The strength of our numbers and the magnitude of our voice depend on your membership. On behalf of all of my colleagues in TNA and ANA, I'm asking you to join with us. The united voices of nurses coming together to advocate for the common good of the populations we serve, while building the practice and profession of nursing, is power.

Lena Patterson
 MSN, RN, APRN, BC, CCNS



**All the benefits of TNA and ANA membership start here – one form; one fee; over 100 benefits for just 76¢ a day.
For about the price of a soft drink, you can belong to your professional association.**

Yes, I want to join with my colleagues in TNA and ANA! I agree that we can accomplish more for our patients and our profession when we unite, pool our resources, and work together toward achieving our common goals.

Automatic Monthly Payment Options

This is to authorize monthly electronic payments of \$23.67 to American Nurses Association, Inc. (ANA). By signing on the line, I authorize TNA/ANA to withdraw 1/12 of my annual dues and any additional service fees from my account, as well as authorizing ANA to change the amount by giving the undersigned thirty (30) days advance written notice. Undersigned may cancel his authorization upon receipt by ANA of written notification of termination twenty (20) days prior to deduction date designated below. Membership will continue unless this notification is received. ANA will charge a \$5.00 fee for any returned drafts or chargebacks.

Signature _____

Checking Account Please enclose a check in the amount of \$23.67 for the first month's payment, which will be drafted on or after the 15th day of each month using the account designated by the enclosed check.

Credit/Debit Card Please complete the credit/debit card information which will be debited on or after the 1st of each month (VISA MasterCard Only). Visa Mastercard
Number _____ Exp. Date _____

Signature _____

Annual Payment Enclose a check payable to TNA, or fill out your credit/debit card information in the amount of \$278.

Last Name (please print)

First Name

MI

Street Address or P.O. Box

City

State

Zip

Email Address

Cell Phone

Home Phone

Work Phone

County of Residence

RN License Number

Who is your Sponsor? (Sponsor not required)

Name

Sponsor's Daytime Phone