



**INTERNATIONAL TRANSPLANT NURSES SOCIETY
GOLDEN TRIANGLE CHAPTER**

MEMBERSHIP APPLICATION

NAME: _____

DATE: _____

RECRUITED BY: _____

BIRTHDATE: _____

POSITION/TITLE: _____

EMPLOYER: _____

HOME ADDRESS: _____

HOME PHONE: _____

WORK ADDRESS: _____

WORK PHONE: _____

E-MAIL: _____

PREFERRED MAILING ADDRESS: ____ HOME ____ WORK

AREA OF EMPLOYMENT:

- STAFF RN, TRANSPLANT UNIT PEDIATRIC
 STAFF RN, ICU ADULT
 TRANSPLANT COORDINATOR SOCIAL WORK
 OTHER: _____

TRANSPLANT RECIPIENTS YOU CARE FOR:

- LIVER RENAL HEART
 PANCREAS INTESTINE LUNG
 BONE MARROW

The membership fee for the Golden Triangle Chapter is \$20.00 annually and will be due in October of each year.

You must also be a member of ITNS, the International Organization.

Checks for chapter dues should be made payable to "Golden Triangle Chapter, ITNS" and sent to:

Golden Triangle Chapter
International Transplant Nurses Society
3459 Fifth Avenue, 7 South
Pittsburgh, PA 15213

International dues are \$ 75.00 for ITNS active membership (All RNs). (All active members are entitled to vote, hold office, and serve on committees.)

International dues are \$ 50.00 for associate membership (Any health professional involved in transplantation; associate members are not entitled to vote, hold office, or serve on committees.)

International dues can be submitted with your Golden Triangle Chapter membership or they can be mailed to the International Office with the International membership application. International membership applications are available online at <http://www.itns.org>

If you have any question about our local chapter or membership, please email us at itnsgtc@upmc.edu

Referred to the Golden Triangle Chapter By: _____