

National Association of Pro-Life Nurses Membership Form

Membership open to nursing students and those nurses formerly or currently employed. Membership includes quarterly newsletter.

Name _____ Phone (_____) _____

Address _____ City _____

State _____ Zip + 4 _____ Email _____

Field of Nursing _____ RN LPN Student

<input type="checkbox"/>	New membership / 1 yr.	\$30.00
<input type="checkbox"/>	Student membership	\$15.00
<input type="checkbox"/>	Pin	\$ 10.00
<input type="checkbox"/>	Legal Fund Donation	\$ _____
	Total:	\$ _____

Mail completed membership form and your check to:

National Association of Pro-Life Nurses, Inc.

169 Sea Ward Ave.

Cameron, Louisiana 70631

www.nursesforlife.org

ExecutiveDirectorNAPN@gmail.com

As a Professional Organization, NAPN...

- Seeks to establish and protect ethical values of the nursing profession
- Defends nursing and para-medical personnel from discrimination and/or job loss for refusal to participate in practices which violate these values
- Demonstrates concern for those facing difficult choices involving life-taking decisions by education and promotion of positive alternative choices
- Seeks to develop life-affirming attitudes in the nursing profession by promotion of these ethical values to those we interact with in the workplace
- Involves the organization's members in the legislative process to promote life-affirming legislation
- Recognizes the value of and supports research beneficial to humanity when it is done with consideration for the dignity of the person involved and with their full and informed consent
- Rejects research involving people unable or unwilling to give their full, informed consent; and research which involves experimentation with dangerous procedures or drugs which impair or endanger the health and well-being of the person or their offspring



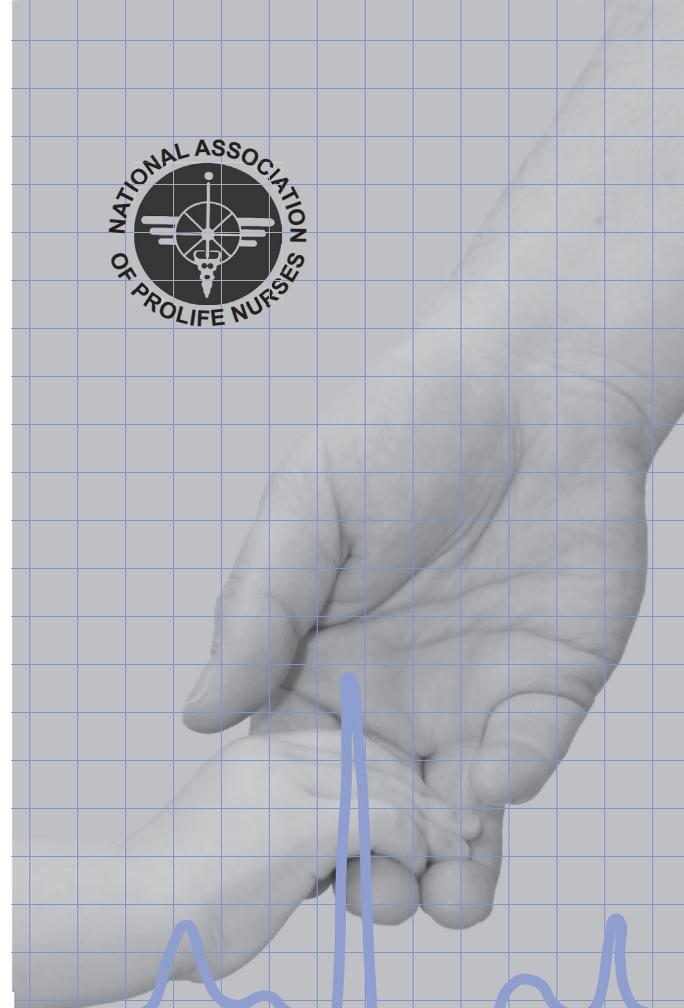
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Take my hand...

Not my Life



**National
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