

BYU Student Nurses' Association Sign-Up

Date: _____

First Name: _____ Middle Initial: _____ Last Name: _____

Please initial next to the semester you are in

	Semester	Cost	Benefits
	Pre-nursing	\$15/semester	SNA activities only
	1st	\$200	1 CPR Certification, 1 CPR Re-certification, 2 year NSNA membership, UtSNA membership, SNA activities for 6 semesters
	2nd	\$150	1 CPR Re-certification, 2 year NSNA membership, UtSNA membership, SNA activities for 5 semesters
	3rd	\$150	1 CPR Re-certification, 2 year NSNA membership, UtSNA membership, SNA activities for 4 semesters
	4th	\$120	1 CPR Re-certification, 2 year NSNA membership, UtSNA membership, SNA activities for 3 semesters
	5th	\$120	1 CPR Re-certification, 1 year NSNA membership, UtSNA membership, SNA activities for 2 semesters
	6th	\$50	1 year NSNA membership, SNA activities for 1 semester

Payment Type: ___ Cash ___ Check ___ Card

Current Address: _____

City: _____ State: _____ Zip Code: _____

Gender: _____

Birth Date: _____

Primary Email Address: _____

Cell Phone Number: _____

I opt in to receive text reminders about activities.