

# MEMBERSHIP

Join a nursing group that disseminates information and promotes communication between national and international organisations related to the field of developmental intellectual disability.

The Professional Association of Nurses in Developmental Disability Australia Inc. (PANDDA) represents the professional interests of nurses who support people who have an intellectual developmental disability.

Visit [www.pandda.net](http://www.pandda.net) for more information.

## Membership Benefits

- National networking and support for nurses working with people who have intellectual developmental disabilities
- A voice in many state and national bodies
- The PANDDA newsletter
- An annual PANDDA conference
- Collegial Support, networking and contribution to your profession
- A professional identity, recognition and autonomy
- Discount for PANDDA conference and educational programs
- Information at [www.pandda.net](http://www.pandda.net)



## Membership Application/Renewal

ABN: 23-647-452-897

Post your completed application form with payment to:  
The Membership Secretary, PANDDA (Aust) Inc.  
PO Box 3633, Parramatta NSW 2124 Australia

### PERSONAL AND PROFESSIONAL DETAILS

SURNAME		FIRST NAME	
POSTAL ADDRESS			
SUBURB/TOWN	STATE	POSTCODE	
COUNTRY	DATE OF BIRTH		
HOME PHONE	EMAIL ADDRESS		
WORK PHONE	MOBILE NUMBER		
OCCUPATION			
EMPLOYER			
POSITION TITLE			

### ACADEMIC AND PROFESSIONAL QUALIFICATIONS

INSTITUTION	QUALIFICATION	YEAR AWARDED

### ANNUAL MEMBERSHIP FEES

#### Full Member (Registered Nurse)

New Member Fee: \$110.00       Member Renewal Fee: \$110.00

#### Associate Member (Enrolled Nurse/Student in Nursing)

New Associate Fee: \$72.00       Associate Renewal Fee: \$72.00

### PAYMENT OPTIONS

#### Direct Deposit

Account Name: Professional Association of Nurses in Developmental Disability Australia.

Pay to PANDDA, BSB Number: 012 370, ANZ Account Number: 938 560 797.  
Reference & payment description must be entered as surname & first name.

#### Personal Cheque or Bank Cheque (Australian dollars ONLY)

Made payable to: Professional Association of Nurses in Developmental Disability Australia

#### Credit Card Payment (Visa or Mastercard)

Visa       Mastercard

Card Number: \_\_\_\_\_

Card Expiry Date: \_\_\_\_\_ CVC (last 3 digits back of card): \_\_\_\_\_

Card Holder's Name: \_\_\_\_\_

Total Amount: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### DECLARATION

I hereby apply for membership of the Professional Association of Nurses in Developmental Disability Australia Inc. (PANDDA). If accepted as a member I agree to be bound by the rules of the association.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## PANNDAA Objectives

To provide a professional association to represent, support and unite all nurses working in developmental disability areas.

To provide an environment which promotes the rights of people who have developmental intellectual disability and their families.

To provide consultancy and liaison with generic agencies.

To disseminate information and promote communication between national and international organisations related to the field of developmental intellectual disability and, in particular, nursing organisations.

To provide information and advice about career structures.

To promote the professional status of developmental disability nurses through:

- the development of standards and quality practice
- the advancement of nursing education in the area of intellectual developmental disability
- lobbying
- increased public awareness
- professional development activities.