

This form updated and signed

Occupational Health Nurses Association of Nova Scotia

www.ohnans.com

	newal Form for May 1, 2022 to April	•
Surname:	First Name:	Initial:
Mailing Address:		
City/Town:	Province:	Postal Code:
Email Address (for Members list):		Tel (home)
Company/Work:		Tel (work)
Address at Work:		
City/Town:	Province:	Postal Code:
Email address where you want to receive message:		
RN Registration Number:	COHN(C) Registration Number:	Retired (no license)
Do you hold a current RN License in NS?	Other provinces (please list):	
Are you a new member this year? Have been past member /now rejoining:		
What credentials do you prefer on the membership list?		
Is there any of the above that you prefer not to share with members?		
Are you willing to serve on a short-term committee?		
Membership Fee: OHNANS membership fee includes provincial and Canadian Occupational Health Nurses Association/Association		
Canadienne des Infirmieres et infirmiers en Sante du Travail (COHNA-ACIIST) dues. Fees are due on or before April 30 of each year.		
Members renewing their membership after that date will be charged and additional \$10.00 for late payment. New members joining after		
November 1st shall pay half a year's dues for the balance of the first fiscal year of membership. There is no late fee for new members.		
Active Membership: \$60.00 per year. This category includes NSCN RNs and LPNs: currently employed in Occupational Health:		
previously employed in Occupational Health but now retired up to 3 years and who are enrolled in an OHN & OHS program.		
Associate Membership: \$60.00 per year. This category includes NSCN RNs and LPNs who: contribute to an Occupational Health		
Program; have been employed in OHN and are now employed in another field of nursing: who wish to pursue a career in OHN; and		
those who are employed in OHN without a NSCN licence.		
Retired Membership: \$30.00 per year. This category includes retired NSCN RNs and LPNs who no longer hold a nursing license		
but wish to maintain membership.		
Student Membership: \$30.00 per year. This category includes full-time students who are enrolled in a full-time nursing student in a		
program in Canada and do not have a nursing license.		
Application for Membership: Application for membership, in the appropriate category, shall be made in writing on the forms provided		
and be accompanied by payment of the applicable annual membership fee, which will be returned to the applicant if membership is		
refused or the application is incomplete.		
I hereby, certify the information on this form is true, correct and complete:		
Signature:	Date	
olgitataro.	- Jaco	
Have you enclosed? Office use only		
Cheque (or etransfer) for Membership Fee	Office use only Payment Received:	
Copy of COHN(C) certificate	Card & Receipt:	

Please send your membership application to and fees by E-transfer (password OHNANS) to ohnansinfo@gmail.com OR send to OHNANS C/O Stephanie Baker, 27 Saratoga Dr. Dartmouth NS B2X3P9

License status checked (date):

Update Membership List: