

Michigan League for Nursing



Michigan League for Nursing
www.michleaguenursing.org

Agency Membership Application

2010-2011 Dues \$100.00

Agency Name: _____

Address: _____

City _____ State _____ Zip _____

Phone: _____ Fax: _____

Website URL: _____

Contact Person: _____

Phone: _____ E-Mail _____

Agency Type: _____

Yes, please send me the Michigan Center for Nursing Updates E-newsletter FREE

Dues: \$100.00

Check _____

Credit Card: Visa ___ MasterCard ___ Number: _____

Signature _____

Exp. Date _____

Return Application to:

**Michigan League for Nursing 2410 Woodlake Drive, Okemos, MI 48864
TX: 517/347-8091 Fax: 517/347-4096**