

New Zealand Orthopaedic Nurses (Ass)

NZONA is an organisation of concerned nurses and other health care professionals who are involved in the field of orthopaedics.



Philosophy

NZONA believes that nurses who provide care to individuals with neuromuscular and skeletal disorders require a specific body of knowledge and skills to deliver the highest standard of care, within the unique cultural context of New Zealand Society.

We believe that this knowledge is acquired, maintained and advanced through basic knowledge, continuing education, standardisation of processes, sharing of information, practice and research.

Objectives

1. To advance the professional profile of Orthopaedic Nursing.
2. To facilitate the sharing of knowledge and support for nurses in the care of orthopaedic patients.
3. To establish identification as a unique group with a specific body of knowledge.
4. To promote the highest standard of practice in orthopaedic nursing.
5. To foster professional growth of the membership in the practice of orthopaedic nursing.
6. To communicate openly and effectively within the Association and with other individuals and groups.
7. To promote nursing research related to orthopaedics.
8. To promote the active involvement of the membership in health promotion and disease prevention activities as appropriate to orthopaedic nursing.
9. To be recognised nationally and internationally.
10. To have a voice in the political arena.

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APPLICATION FOR MEMBERSHIP

TITLE: Miss / Ms / Mrs / Mr (please circle)

Surname: _____

First Name: _____

Home Address: _____

Telephone: Home _____

Work _____

Workplace Address: _____

Email Address: _____

Membership Category

Full \$50.00

Note: \$10.00 of your dues is forwarded to the Australia New Zealand Orthopaedic Nurses Association with which NZON is affiliated.

Payment Plans

Cheque (Please make cheque payable to NZ Orthopaedic Nurses)

Cash

Internet banking

ANZ 01 0194 0203585 00

Data collected for statistics only

Employer: _____

Current position: _____

Years of orthopaedic experience: _____

Area of Interest: _____

- Age
- <20 yrs
 - 20 – 30 yrs
 - 30 – 40 yrs
 - 40 – 50 yrs
 - > 50 yrs

Members Signature: _____

Tear off this section and return with remittance to:

Diane Lanting
61 Sunnyhills Avenue
Hamilton 3206

Email: dianz@xtra.co.nz

Why join?

- To promote a high standard of practice in orthopaedic nursing.
- To encourage professional growth and development by attending monthly education sessions pertaining to orthopaedic issues.
- To share ideas and knowledge of advances in the treatment and rehabilitation of orthopaedic patients; locally, nationally and internationally.
- To participate and help your local area host a national conference.
- To receive our national newsletter informing you of current happenings in orthopaedic nursing.
- To have a voice in the changing and challenging environment of orthopaedic nursing.
- To profit from the alliances and friendships formed by networking with other individuals involved in orthopaedic nursing.

Membership Application Form

