



Student Nurse Membership Application

Membership is free to students – no fee required.

Name:

Address:

Female: Male: Date of Birth:

Mobile Telephone Number:

Current Email Address:

Date of final examination:

(Month and Year)

University/College:

Hospital Placement:

Signature & Date:

NOTE:

Your membership with I.N.M.O is only valid for the year/s you are a student. On completion of your studies you will need to renew your membership with I.N.M.O as a Registered Nurse or Midwife.