



**Organizational Affiliate Criteria**  
*As set by the 2016 ANA Membership Assembly*

- Have a mission and purpose harmonious with the purposes and functions of ANA.
- Be national in scope with at least 500 members.
- Be incorporated for at least two years, conduct at least a biennial meeting and maintain a national office.
- Be comprised and governed by a majority of registered nurses.
- Agree to pay an annual fee, and
- Not engage in any activity deleterious to the interests of ANA and/or its C/SNA, subsidiaries, or members.

**Procedure to become an ANA Organizational Affiliate**

- Fill out the application and return it to ANA at the address on the application. Include your organization's bylaws and list of current board members.
- ANA staff will review the application and ensure the organization meets the above criteria.
- If the organization meets the criteria, the application is forwarded to the ANA Board of Directors for final approval. The ANA Board of Directors typically meets on a monthly basis so the approval process does not take too long.
- After the ANA Board of Director's decision, ANA staff will notify the applicant and set a date for orientation if appropriate.

**Questions?**

**Contact Barbara Opatick at 301-628-5015 or [barbara.opatick@ana.org](mailto:barbara.opatick@ana.org)**

## **American Nurses Association's Organizational Affiliates Rights & Benefits & Obligations**

### **Organizational Rights via the ANA Bylaws**

1. Representation at the ANA Membership Assembly
  - a. One representative at the Membership Assembly who is a registered nurse participant and who is a member of a C/SNA or the IMD and who shall be eligible to vote on all matters in the Membership Assembly except the setting of membership dues, amendment of bylaws, and the election of officers and directors.
  - b. The Chief Staff Officer of the organizational affiliate shall have a courtesy seat with voice but no vote.
  - c. Make reports or presentations to the Membership Assembly within its area of expertise, including the presentation of action reports.
  - d. Submit reference proposals for consideration by the Membership Assembly.
2. Participation on Professional Issues Panels, Committees, Task Forces
  - a. May submit names of qualified registered nurse members as nominees for appointment to serve on committees, task forces, ad hoc groups and as ANA representatives to external groups.
  - b. May nominate qualified registered nurse members as nominees for appointment to serve on Professional Issues Panels (Steering Committee or Advisory Committee).
  - c. Nominee must be RN and an individual member of ANA.
3. Liaison Representative at the ANA Board of Directors
  - a. Non-Voting Liaison seat on ANA Board representing all Organizational Affiliates.
  - b. Must be RN and an individual member of ANA.
  - c. Travel and hotel expense paid by ANA per ANA travel policy.
  - d. The individual board representative is elected by all Organizational Affiliates at the meeting associated with the ANA Membership Assembly in even years.
4. Preference to OAs for Specific Policy Initiatives & Representation
  - a. Invitations to testify on specific board committees and task forces, attending meetings at the White House, etc. will be based on the issue.

### **Other Organizational Benefits**

1. Participate in two Organizational Affiliate meetings per year (connected to ANA's Membership Assembly and to the fall Nursing Organization Alliance Meeting).
2. Upon request, certain complimentary e-books from NursesBooks.org, ANA's publishing program (10-15/yr avg).
3. Hard copy of ANA publications at 20% discount.
4. *Two complimentary subscriptions to American Nurse Today* - OA President & Chief Staff Officer.
5. *American Nurse Today* – 25% discount on advertising.
6. OA members featured in *American Nurse Today* articles specific to the specialty issue covered.
7. ANA listserv for OAs.
8. OA link on ANA's website: NursingWorld.org
9. Two free promotional announcements about meetings or other OA activities in the ANA Nursing Insider (e-newsletter) per year.
10. Discount on ANCC CNE Accreditation (Discounts of 25-45%).
11. Based on nursing specialty, primary consideration for sending representatives to assorted events where ANA is invited.

**Organizational Affiliate Obligations**

1. Pay dues of \$5000 per year (based on calendar year)
2. Notify ANA of any officer changes
3. Add ANA to your press release and publication distribution lists
4. Notify ANA of your annual meetings



## Application for ANA Organizational Affiliates

Please note, membership is based on the calendar year.

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Main Phone Number: \_\_\_\_\_ Main Fax: \_\_\_\_\_

Web Address: \_\_\_\_\_

Executive Director/CEO: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

President: \_\_\_\_\_

E-Mail: \_\_\_\_\_

President Elect: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Organization Purpose: \_\_\_\_\_

Number of Members: \_\_\_\_\_ Number of RN Members: \_\_\_\_\_

Year Incorporated: \_\_\_\_\_ Annual or Biennial Meeting? When? \_\_\_\_\_

Number on Board: \_\_\_\_\_ RNs on Board: \_\_\_\_\_

Please also attach a copy of your bylaws and current board members. (Electronic versions may be sent to the e-mail address below)

### Organizational Affiliate Membership Dues: \$5,000

Invoice for membership dues will be submitted after the application is reviewed and approved by ANA Board of Directors.

#### Please return this form to:

Barbara Opatick  
American Nurses Association  
8515 Georgia Ave, Suite 400  
Silver Spring, MD 20910  
Fax: 301-628-5340  
barbara.opatick@ana.org

<b>For ANA use only:</b>
Date Received: _____
Paid: _____
Invoiced: _____
Confirmed: _____