

CSUSB Nutrition Student Association

Membership Application Spring 2016 – Winter 2017

Membership Benefits

Networking opportunities
 Develop leadership skills
 Volunteer opportunities
 Experiences to enhance resume

Membership Dues - \$15/year

Spring to Winter quarters,
 graduating seniors, last quarter included
 Includes a club t-shirt

Include payment in ___cash or ___ check
 payable to: Nutrition Student Association
 Turn in form and fee to Dr. Chen-Maynard in
 PS 226 NSA Email Address:
csusb.nutritionclub@gmail.com

Name: _____
Last First DATE

Address: _____
Street City/State Zip Code

Phone: _____ Email: _____

Major: _____ Class Standing (circle one): FR SOPH JR SR

Anticipated Graduation Date (month and year): _____ AND Member? Yes ___ No ___
 AND #: _____, if you are not a member, please sign up at www.eatright.org (\$50/year, June-May)

IMPORTANT!

Once you've become a member, please register at OrgSync.com at CSUSB and stay in touch with NSA. This website contains a calendar of activities, meeting minutes, contact information, and allows us to send important messages to members.

What are your expectations, visions, or any comments related to the club? Please be specific.

I would like to be involved with the following NSA activities, please contact me (Pls. check areas of interest): I want to serve as a committee chair _____

Fundraising ___ Inland District Dietetic Association Rep. ___ National Nutrition Month Library Display ___ Speakers program ___ Newsletter ___

Community Outreach ___ Blood Drive: ___ Health Fairs: ___ Awards ___ Other activities (specify) _____

I have the following talents or skills and can share with the club: _____



T-shirt received: S ___ M ___ L ___ Date: _____
 XL ___ Others: ___ Initial _____

For Treasurer use only:

Payment Received: ___cash
 ___check Number: _____

Date Received: _____

