



IESNO

Inland Empire School Nurse Organization

Apply online: <https://www.iesno.com/>

MEMBERSHIP DUES: \$30.00 Please make checks payable to IESNO
Mail to: Josette deBruyn 708 Amber Sky Street, Banning, CA 92220

Name: _____
Last First

Address: _____
Street City Zip

Phone: _____ Email: _____

Employer: _____

Position Title: School Nurse _____ Other (Please specify) _____

California RN License Number: _____ Expiration Date: _____