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| ISN logo | **International Society of Nephrology**  **ISN affiliated societies**  **2019** |

# Join ISN as an affiliated society!

Would you like to join a truly global medical society supporting research, education, and advocacy, and dedicated to advancing kidney health worldwide?

An ISN affiliated society is a national or regional society that provides member benefits to advance nephrology and related disciplines in a country or region. Several affiliated societies in one country can apply to become an ISN affiliated society, representing the same discipline in one country or region.

Affiliated societies run activities that conform to the ISN mission of advancing worldwide kidney health. Over 100 affiliated societies are already members of the ISN community.

# Benefits

As an ISN affiliated society:

* Be part of your ISN regional board and become eligible to sit on the ISN council; ISN membership is required for the person representing your society on this board
* Appear on the ISN [website](file:///C:\Users\Miriam%20Ravelo\AppData\Local\Temp\:%20https:\www.theisn.org\about-isn\partners-and-affiliates\affiliated-societies)
* You can apply for endorsement of your congresses, courses and events and list them on the ISN website ([application](https://www.theisn.org/events/endorsed-events) required)
* Receive a WCN basic exhibitor pack at a discounted rate
* As institutional partner, take part in a networking session and a social event during WCN and/or at Kidney week
* Receive ISN Connect, the quarterly e-newsletter with exclusive information about ISN strategy and news

# How to Apply

Submit your application which will be reviewed by the executive committee and regional board. Upon positive recommendation, the ISN council ratifies the status of the new affiliated society. Applications must be sent by email to [membership@theisn.org](mailto:membership@theisn.org) or by mail to:

International Society of Nephrology

Avenue des Art, B – 1210 Brussels, Belgium

info@theisn.org

They should include:

* The completed application form (see next pages).
* An official letter from the society, addressed to the current [ISN President](https://www.theisn.org/about-isn/leadership/executive-committee), stating that
  + the society wishes to become an ISN affiliated society
  + the society adheres to the [Declaration of Istanbul](http://www.declarationofistanbul.org/), the [World Medical Association Declaration of Geneva](https://www.wma.net/policies-post/wma-declaration-of-geneva/) and the [World Medical Association Declaration of Helsinki](https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/)
* The constitution (statutes) of the association
* A short description of the society activities over the past three years

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| **Your society contact details** | | | | | | | | | |
| Society name: | | | |  | | | | | |
| Acronym *(if applicable)* | | | |  | | | | | |
| Website | | | |  | | | | | |
| General email | | | |  | | | | | |
| Phone |  | | | | Fax | | |  | |
| Office address | | | |  | | | | | |
| Main contact person for ISN: | | | |  | | | | | |
| Function with the society: | | | |  | | | | | |
| Email address | | | |  | | | | | |
| Phone |  | | | | Fax | | |  | |
| Postal address *(if different from office address)* | | | |  | | | | | |
| **About your society** | | | | | | | | | | |
| Society year of foundation | | |  | | | | | | | |
| Geographical area covered | | |  | | | | | | | |
| Number of current members | | |  | | | | | | | |
| Members’ main areas of professional interest | | | 🞏 Acute renal failure  🞏 Anemia  🞏 Biostatistics  🞏 Cell and molecular biology  🞏 Chronic renal failure  🞏 Clinical nephrology  🞏 Developmental biology  🞏 Diabetes  🞏 Dialysis  🞏 Genetics  🞏 Hemodialysis  🞏 Hemofiltration | | | | 🞏 Hypertension  🞏 Immunology  🞏 Interventional/critical care nephrology  🞏 Membrane transport  🞏 Mineral metabolism  🞏 Nephrolithiasis  🞏 Pathology  🞏 Pediatric nephrology  🞏 Peritoneal dialysis  🞏 Pharmacology  🞏 Physiology  🞏 Transplantation  🞏 Urology | | | |
| Your members’ main occupation | | | 🞏 Basic researcher  🞏 Clinical practitioner  🞏 Clinical researcher | | | | 🞏 Retired  🞏 Student  🞏 Teacher/educator | | | |
| Number of staff members *(if relevant)* | | |  | | | | | | | |
| **Society leadership** | | | | | | | | | | |
| President name | |  | | | | Term started (mm/yyyy) | | |  | |
| Email | |  | | | | Term will end (mm/yyyy) | | |  | |
| **Please fill in the email contact details of other leaders of your society if they wish to receive our information** | | | | | | | | | | |
| Secretary name | |  | | | | Term started (mm/yyyy) | | |  | |
| Email | |  | | | | Term will end (mm/yyyy) | | |  | |
| Treasurer name | |  | | | | Term started (mm/yyyy) | | |  | |
| Email | |  | | | | Term will end (mm/yyyy) | | |  | |

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| **Your society educational programs** | | | | | |
| **Details of current year planned congress** | | Dates: |  | | |
| City, country: |  | | |
| Website: |  | | |
| Expected number of participants: |  | | |
| **Details of future planned  congress** | | Dates: |  | | |
| City, country: |  | | |
| Website: |  | | |
| Expected number of participants: |  | | |
| Please give us some information about the society's **main scientific journal:** | |  | | | |
| Please give us some information on the society's **main newsletter to members:** | |  | | | |
| **Relationship with the ISN** | | | | | |
| How would you describe your current relationship with the ISN?  🞏 Active 🞏 Good 🞏 Poor 🞏 Non-existent | | | | | |
| Is the ISN web link posted on your society website? | | | | 🞏 Yes 🞏 No 🞏 Not sure | |
| Has your annual congress ever benefited from the support of ISN CME Program? | | | | 🞏 Yes 🞏 No 🞏 Not sure | |
| Has your annual congress ever been endorsed by ISN? | | | | 🞏 Yes 🞏 No 🞏 Not sure | |
| Has your society ever been involved in World Kidney Day activities and celebrations? | | | | 🞏 Yes 🞏 No 🞏 Not sure | |
| **Other collaboration, please specify:** | | | | | |
| **Documents requested to complete the application** | | | | |
| In order to complete your application, please attach the following documents to this form and send it back by email, or post to the address below. | | | | |
| 1 | Letter of intent (see page 2 of this document for details of content) | | | |
| 2 | Constitution of the society | | | |
| 3 | Membership list (if you wish to receive our communications) | | | |
| 4 | Description of the society activities over the past three years | | | |

In accordance to the privacy laws, ISN does not provide contact details of ISN affiliate societies to third parties, including not-for-profit entities. In addition, ISN does not send out individual email campaigns to announce events other than ISN organized meetings or educational sessions.