

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:

- Get a seat on your ISN region's regional board; ISN membership is required for the person representing your society on this board
- Appear on the ISN website
- You can apply for endorsement of your congresses, courses and events and list them on the ISN website (application required)
- Receive a WCN basic exhibitor pack at a discounted rate
- As institutional partner, take part in a networking session and a social event organized by ISN

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 or by mail to:

International Society of Nephrology

Avenue des Arts, 2 – 1210 Brussels, Belgium

They should include:

- The completed application form (see next pages).
- An official letter from the society, addressed to the current <u>ISN President</u>, stating that
 - o the society wishes to become an ISN affiliated society
 - the society adheres to the <u>Declaration of Istanbul</u>, the <u>World Medical Association</u>
 Declaration of Geneva and the World Medical Association Declaration of Helsinki
- The constitution (statutes) of the association (in English)
- A short description of the society activities over the past three years
- A Declaration of funding sources.
- Not mandatory, a list with all your members names and emails to send ISN communications



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 fro									
office address)									
About your society									
Society year of foundation									
Geographical area covered									
Number of current members									
Members' main areas of ☐ Acute renal failure				☐ Hypertension					
professional interest	ПΑ	nemia		☐ Immunology					
		iostatistics		☐ Interventional/critical care nephrology					
		Cell and molecular biology		☐ Membrane transport					
		Chronic renal failure		☐ Mineral metabolism					
		Clinical nephrology		☐ Nephrolithiasis					
l l		evelopmental biology		☐ Pathology					
	iabetes		☐ Pediatric nephrology						
		ialysis		☐ Peritoneal dialysis					
	_	enetics		☐ Pharmacology					
		emodialysis		☐ Physiology					
	ΙШΗ	emofiltration		☐ Transplantation					
			□ Urology						
Your members' main		asic researcher linical practitioner		Retired					
occupation	·			☐ Student					
☐ Clinical researcher ☐ Teacher/educator									
Number of staff members (if relevant)									
Society leadership									
Election terms									
Date of next President			Torr	n length					
elections		16		erm length					
Current President									
President name			Torr	n started (mm/yyyy)					
Email				Term will end (mm/yyyy)					
· ·	t datai	Is of other leaders of your			our information				
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				erm will end (mm/yyyy)					
Treasurer name			Term started (mm/yyyy)						
Email			Term will end (mm/yyyy)						
Vice President name				n started (mm/yyyy)					
Email			Term will end (mm/yyyy)						
LITIOII			1611	n win ena (min, yyyy)	i				

Your society educational programs								
	ls of current year	Dates:						
planned congress		City, country:						
		Website:						
		Expected number of						
		participants:						
	ls of future planned	Dates:						
congress		City, country:						
		Website:						
		Expected number of participants:						
	e give us some							
	nation about the							
	ty's main scientific							
journ								
	e give us some							
	mation 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?						☐ Not sure		
Has your annual congress ever benefited from the support of ISN CME			I CME	☐ Yes	□No	☐ Not sure		
Program?								
	Has your annual congress ever been endorsed by ISN?				□No	☐ Not sure		
Has your society ever been involved in World Kidney Day activities and				☐ Yes	□ No	☐ Not sure		
celebrations?								
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	Brief description of the society activities over the past three years							
5	Declaration of Funds							

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.