



INTERNATIONAL SOCIETY FOR PERITONEAL DIALYSIS

Institutional Membership

A nephrology institute from eligible countries or regions with interest in or practice of peritoneal dialysis may join the ISPD as an institutional member. There shall be ONE principal member within each institution. He / She can nominate up to another 9 members (nominated members) from the same institute. The principal member shall be responsible for all correspondence with the ISPD. The same principal and nominated members shall be renewed every year.

The rights and benefits of the institutional member include:

1. One copy of each issue of the official journal of the ISPD, Peritoneal Dialysis International, and the newsletter of the ISPD will be sent to the principal member. The principal member shall be responsible for distribution of the journal and newsletter to other nominated members from the same institute.
2. Both the principal and nominated members are eligible for ISPD member special registration rate in the courses, meetings or congresses organized by the ISPD.
3. Both the principal and nominated members are eligible for access to the current issues and archives of Peritoneal Dialysis International online. Any password offered to the members shall not be passed to persons outside the list of the principal and nominated members. If the access password is passed to anyone other than the 10 total members, institutional membership shall be revoked for all members.
4. Both the principal and nominated members are eligible to apply for scholarships, traveling grants and research grants of the ISPD whenever available.
5. ONLY the principal member shall have voting rights in the ISPD.

The annual rate for an institutional member is US \$145.00

* This rate is available by special request by the principal member, and cannot be subsidized by an industry sponsor.

Eligible Countries: All countries except the following:

Andorra	Hong Kong, China	Slovenia
Aruba	Iceland	Spain
Australia	Ireland	Sweden
Austria	Israel	Switzerland
Bahamas, The	Italy	Taiwan
Bahrain	Japan	United Arab Emirates
Belgium	Korea, Rep.	United Kingdom
Bermuda	Kuwait	United States
Brunei	Liechtenstein	Virgin Islands (U.S.)
Canada	Luxembourg	
Cayman Islands	Macao, China	
Channel Islands	Monaco	
Cyprus	Netherlands Antilles	
Denmark	New Caledonia	
Faeroe Islands	New Zealand	
Finland	Northern Mariana Islands	
France	Norway	
French Polynesia	Portugal	
Germany	Qatar	
Greece	San Marino	
Greenland	Saudi Arabia	
Guam	Singapore	



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2017 Institutional Membership Application / Renewal Form

www.ispd.org

Principal member:

First Name: _____ Last Name: _____

Job title: _____ E-mail address: _____

Signature: _____

Nominated members:

	Name	Job title	E-mail address	Signature
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____

Mailing/Contact Information:

Institute: _____

Department: _____

Street Address: _____

City: _____ State / Province: _____

Zip / Postal Code: _____ Country: _____

Phone: _____ Fax: _____

Peritoneal Dialysis International Journal Options (please select one):

Print Only Online Only Print & Online

New members who order the online option will receive their customer number and instructions for obtaining online access. The username and password created upon activation is to be shared by both the principal and nominated members. Renewing members will keep the same user name and password for 2016 online access, which is active once payment is processed. For the print option, the principal member will receive the journal by mail.

Payment Options

Check (should be made payable and mailed to the ISPD C/O International Society of Nephrology 340 North Avenue 3rd Fl, Cranford, New Jersey 07016 United States of America)

Credit Card: Charge \$_____USD to my: Visa MasterCard American Express

Card Number: _____ Expiry Date: _____

Cardholder: _____

Cardholder's Signature: _____

Card Verification Code (CVC): _____ (3 digit code on back of card – required for Visa & MasterCard only)

Send completed form by **FAX** to +32 2 8084454, by **E-MAIL** to admin@ispd.org or **MAIL** completed form and payment to:
International Society for Peritoneal Dialysis, Rue des Fabriques 1B – Brussels 1000 - BELGIUM