

Enrollment Form

(Please print)

Personal Information

Last name First name

Credentials

Specialty:

- ☐ Acute kidney injury ☐ CKD ☐ Dialysis
☐ Glomerular disease ☐ Hypertension ☐ Primary care
☐ Nutrition ☐ Pediatrics
☐ Transplantation ☐ Other _____

Affiliation

Address ☐ Home ☐ Work

City State Zip Country

Phone ☐ Cell ☐ Work ☐ Home

Email (required)

I would prefer to be contacted by:

- ☐ Phone ☐ Text ☐ Email

Payment Information

Please charge my credit card:

- ☐ Mastercard ☐ Visa ☐ Amex ☐ Discover

Account #

Expiration date CVV (security code)

Name of cardholder

Signature

- ☐ Enclosed is a check in U.S. dollars made payable to the
National Kidney Foundation. Check # _____

**International members must pay in U.S. dollars by
international money order or bank draft drawn on a U.S. bank.*

Membership Options

	1 year membership	2 year membership
Physician/Scientist	<input type="checkbox"/> \$375	<input type="checkbox"/> \$725
Dietitian	<input type="checkbox"/> \$120	<input type="checkbox"/> \$215
Social Worker	<input type="checkbox"/> \$120	<input type="checkbox"/> \$215
Pharmacist	<input type="checkbox"/> \$120	<input type="checkbox"/> \$215
Nurse	<input type="checkbox"/> \$120	<input type="checkbox"/> \$215
Nurse Practitioner	<input type="checkbox"/> \$120	<input type="checkbox"/> \$215
Physician Assistant	<input type="checkbox"/> \$120	<input type="checkbox"/> \$215
Technician	<input type="checkbox"/> \$50	<input type="checkbox"/> \$90
Student*	<input type="checkbox"/> \$25	N/A
Nephrology Fellow*	<input type="checkbox"/> Complimentary	N/A
Resident*	<input type="checkbox"/> Complimentary	N/A

**Proof of status required.*

Journal print add-on options are available online through
[kidney.org/membership](https://www.kidney.org/membership)

3 Easy Ways to Join



Online

Join at [kidney.org/membership](https://www.kidney.org/membership)



Mail

Mail complete form to:

National Kidney Foundation
Attn: Membership Department
GPO Box 5456
New York, NY 10117-3193



Telephone

Call us toll-free at **888.JOIN.NKF**
(888.564.6653)

Questions?

Email: membership@kidney.org

NATIONAL KIDNEY FOUNDATION MEMBERSHIP



Join Today!

- Professional and Patient Resources
- Free and discounted CE activities
- Professional opportunities



NATIONAL KIDNEY
FOUNDATION®

Member Benefits

	Physician/ Scientist	Dietitian	Social Worker	Pharmacist	Nurse	Nurse Practitioner	Physician Assistant	Technician	Student	Nephrology Fellow	Resident
Free and discounted CE activities through NKF's PERC	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Discount to NKF Spring Clinical Meetings	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓
<i>American Journal of Kidney Diseases (AJKD)</i>	✓	✓ E-only	✓ E-only	✓ E-only	✓ E-only	✓ E-only	✓ E-only	⌘	⌘	✓	✓
<i>Advances in Kidney Disease and Health (AKDH)</i>	✓ E-only	✓ E-only	✓ E-only	✓ E-only	✓ E-only	✓ E-only	✓ E-only	⌘	⌘	✓ E-only	✓ E-only
<i>Journal of Renal Nutrition (JRN)</i>	✓ E-only	✓ E-only Option	✓ E-only	✓ E-only	✓ E-only	✓ E-only	✓ E-only	⌘	⌘	✓ E-only	✓ E-only
20% discount on open access publishing fee for <i>Kidney Medicine</i>	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
20% discount on open access publishing fee for <i>AJKD, AKDH, JRN</i>	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<i>Primer on Kidney Diseases</i>						✓	✓				✓
<i>Journal of Nephrology Social Work (JNSW)</i>			✓								
Pocket Guide to Nutrition		✓									
Membership in NKF National Professional Councils		✓	✓		✓	✓	✓	✓			
Opportunity to apply for research grants, professional designations, and travel grants	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

⌘ Additional purchase required.

Journal print add-ons are available for an additional fee online. View the full list of benefits at [kidney.org/membership](https://www.kidney.org/membership)

