



EUROPEAN RENAL ASSOCIATION

EUROPEAN DIALYSIS AND TRANSPLANT ASSOCIATION

Registered Charity No. 1060134

JUNIOR MEMBER'S APPLICATION FORM

(send ALSO the "ERA-EDTA Application Form" if you are NOT a current member)

Last name: _____ First name: _____

Address for correspondence : _____

Post code: _____ Country: _____

Telephone: _____ Fax: _____

E-mail: _____

Date of birth: ____/____/____
(day/month/year)

Requirements:

- under 40 years

Please enclose:

- a photocopy of a personal ID
(passport, ID card, driver's licence)

New and old members who fulfill the above requested requirement will be able to pay EURO 50.00 for their 2010 Junior ERA-EDTA membership fee. This will include all the benefits of being a member of the ERA-EDTA, including free access to NDT+NDT-Plus Online, except receiving the print issues of NDT and NDT-Plus. **This form must ONLY be sent the FIRST time you apply for Junior membership status!**

Please send this form with a photocopy of your personal picture document **(together with your "Application Form for Membership in the ERA-EDTA" only if you are a NEW member)**, to:

ERA-EDTA Membership Office
Via A. Moro, 18
35030 Bastia di Rovolon (PD)
ITALY
Fax: +39-049-9910957
E-mail: membership@era-edta.org