



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 in which birth date is clearly written
(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 2011 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