



## **Information for Application of Membership of International Federation of Kidney Foundation – World Kidney Alliance**

**(v20.07.20)**

### **I. CATEGORIES OF MEMBERSHIP**

#### **A. Organizational Member**

To be eligible for Organizational Membership, an organization must be:

- (i) A local, regional or nation-wide Kidney foundation, Kidney patient group or kidney advocacy organization which is primarily committed to improving the health, care and well-being of individuals with or at high risk of developing Kidney Disease or Kidney Failure
- (ii) A non-profit/ charitable entity under the laws of their country of incorporation;
- (iii) Multidisciplinary, meaning that the entity should have among its Membership: individuals from at least two of the following groups: medical practitioners/ physicians, nurses, dietitians, allied health, academics, researchers, social workers, people with kidney disease or kidney failure, care-partners including family members or caregivers of such patients, and people from the community at large who are interested in kidney advocacy

#### **B. Affiliate Member**

To be eligible for Affiliate Membership, an organization must be:

- (i) A local, regional or nation-wide organization that does not fulfil all of the criteria for IFKF-WKA Organizational Membership and that is committed to improving the health, medical care and well-being of individuals with or at high risk of developing Kidney Disease or Kidney Failure; or that is engaged in kidney health advocacy activities;
- (ii) Single or multidisciplinary
- (ii) A non-profit/ charitable entity under the laws of their country of incorporation;

### **C. Associate Member**

To be eligible for Associate Membership, one must be:

A person who is or is not involved in healthcare but who is concerned with the provision, care, support or advocacy for people with or at high risk for developing Kidney Disease or Kidney Failure.

***For information: Representatives and Voting.***

*Organizational and Affiliated Members shall be entitled to receive notice of, and appoint a representative to act on its behalf at the General and Extraordinary Meetings and have one vote each.*

*Associate Members shall also be entitled to receive notice of and attend the General and Extraordinary Meetings and is entitled to a partial vote, which is counted as 1/10 of the vote of an Organizational Member or affiliated Member, unless the Associate Member is a member of the IFKF-WKA Council, in which case the Associate Member will have a full vote equal to that of an Organizational Member or Affiliate Member.*

## **II. APPLICATION FOR MEMBERSHIP**

An organization or an individual wishing to become a member must file an application using the application form (Appendix 1a or 1b) and provide supporting documents (Appendix 2 – Supporting document) with the Secretary of the IFKF-WKA.

[Application form for Organisation/Affiliate Membership](#)

[Application form for Associate Membership](#)

Send the completed application form to IFKF Secretariat Services

– [tankerifkf@gmail.com](mailto:tankerifkf@gmail.com)

Application submission will be acknowledged within a week.

The application will be reviewed by the Membership and Council Subcommittee.

The recommendation (acceptance and the fee reduction) to be endorsed by the full Council of IFKF-WKA.

Result of the application will be made known to the applicant within 4-6 weeks, with instruction on payment of the annual fee.

### III. **MEMBERSHIP FEE**

IFKF-WKA adopts a low standardized annual fee for members.

To facilitate participation from organization and individual from around the world with diverse economic background, an applicant may request a reduction of the annual fee.

Members are cordially invited to contribute to the IFKF-WKA Fund by taking up the sponsorship option.

#### **(i) Annual fee**

##### **(a) Organization or Affiliate membership**

- US\$500 for one year (option of a single payment of US\$900 for two years)

An organization from the low-income and lower-middle-income economies countries as defined by World Bank\* can apply for a reduced rate.

An organization from the high-middle-income and high-income economies countries which is (i) a patient-based/ patient-advocacy group or (ii) of small size in the number of members can also apply for a reduced rate.

The membership committee may grant a 25%-50%-75%-95% reduction, based on the financial status and the size of the individual application.

Level 1	Full fee	US\$500 for 1 year,	US\$900 for 2 years
Level 2	25% reduction	US\$375 for 1 year,	US\$675 for 2 years
Level 3	50% reduction	US\$250 for 1 year,	US\$450 for 2 years
Level 4	75% reduction	US\$125 for 1 year,	US\$225 for 2 years
Level 5	95% reduction	US\$25 for 1 year,	US\$45 for 2 years

##### **(b) Associate Membership**

- US\$50 for one year (option of a single payment of US\$90 for two years)

An applicant from the low-income and lower-middle-income economies countries can apply for a reduced rate at US\$30 per year (US\$55 for 2 years).

An applicant who is a kidney patient from the high-middle-income and high-income economies countries can also apply for a reduced rate at US\$30 for one year (US\$55 for two years).

\* <https://datahelpdesk.worldbank.org/knowledgebase/articles/906519-world-bank-country-and-lending-groups> See Appendix 3.

#### **(ii) Payment date and duration of annual fee**

The annual fee is for the 12 months from 1 July to the 30 June of the following year.

The annual fee is payable from 1 July till 30 September of each year, to enable the member to be eligible for voting at the AGM which is held towards the end of the year.

#### **IV. APPEAL**

##### **Rejection by the Membership Committee**

In the case of a membership application being rejected by the membership committee, the applying prospective member has the right to ask for an appeal reviewed by the full IFKF Council.

#### **V. DISCONTINUATION OF MEMBERSHIP**

(i) Failure to pay membership fees for two consecutive years following the receipt of the reminder. In case of a member experiencing financial difficulties, the member can request the Membership committee to reconsider the status of the member for appropriate fee reduction.

(ii) Action or activity conducted by a member which has caused damage to the reputation of IFKF-WKA . This decision will only be taken after thorough consideration by the Council member of IFKF-WKA.



**APPLICATION FOR ORGANISATIONAL AND AFFILIATE MEMBERSHIP**

Name of organization	
Postal address	
Email	
Website	

<b>The representative from the organization for IFKF-WKA related activity</b>	
Name:	
Position:	
Email:	
Phone:	
<b>The contact person from the organization for IFKF-WKA (if different from above)</b>	
Name:	
Position:	
Email:	
Phone:	

<b>INFORMATION OF THE ORGANIZATION</b>	
Is your organization registered with a government authority in your country?	
What year was your foundation/organization established?	
Vision/mission statement	
Key objectives of the organization	
Do you have an official not for profit status and tax-deductibility?	
Do you receive government or corporate financial assistance? If yes, the amount.	
What is the size of your organization? Types of member and number	

Brief description of the financial status of your organization. (Annual gross amount turnover, Income, Expenditure, balance)	
Do you have paid staff? (Number, type)	
How many volunteers assist (full-time equivalent)?	
Key activities (list 5-10)	

<b>Type of Membership being applied.</b>	<input type="checkbox"/> Organization member
	<input type="checkbox"/> Affiliate member
	<input type="checkbox"/> Level 1 US\$500 for 1 year, US\$900 for 2 years
<b>Request of fee reduction (if applicable)</b> Please indicate your preference. The Membership committee will review your application and grant the appropriate level of fee reduction.	<input type="checkbox"/> Level 2 US\$375 for 1 year, US\$675 for 2 years
	<input type="checkbox"/> Level 3 US\$250 for 1 year, US\$450 for 2 years
	<input type="checkbox"/> Level 4 US\$125 for 1 year, US\$225 for 2 years
	<input type="checkbox"/> Level 5 US\$25 for 1 year, US\$45 for 2 years

**Supporting documents [Please tick if provided]**

A copy of a formal resolution to apply for Membership or an official application letter from the Board/committee, with the name of the nominated representative.	
A copy of the Bylaws/Regulations (optional)	
A copy of the latest Annual Report of the organization (if available)	
A copy of the Information sheet/booklet of the organization (if available).	
A copy of the latest certified financial statement * * if applying for the annual fee reduction	

Signed by :	
Date:	



International Federation  
of Kidney Foundations  
- World Kidney Alliance  
Improving Kidney health  
and care for all

Appendix 1b.

### APPLICATION FOR ASSOCIATE MEMBERSHIP

Name of applicant	
Postal address	
Email	
Website	
Contact Phone	
Your professional	
Your current work position / organization	
Your most recent work position / organization (if applicable)	
Your affiliation with other professional / patient organization (name, position)	
<b>Why do you want to become an associate member of IFKF-WKA?</b>	
<b>Your experience/expertise that may contribute to IFKF-WKA</b>	
<b>List some of your work / contribution to renal service and renal community.</b>	

<b>Standard annual fee</b>	<input type="checkbox"/> Level 1 US\$50 for 1 year, US\$90 for 2 years
<b>Request of fee reduction (if applicable)</b>	<input type="checkbox"/> Level 2 US\$30 for 1 year, US\$55 for 2 years

#### Supporting documents [Please tick if provided]

A brief CV or introduction of the applicant	
---	--

Signed by :	
Date:	

**List of supporting documentation required.**

	Organization Affiliate member	Associate member
A copy of a formal resolution to apply for Membership or an official application letter from the Board/committee, with the name of the nominated representative.	Required	Not applicable
A copy of the Bylaws/Regulations	(Optional)	
A copy of the latest Annual Report of the organization.	(If available)	Not applicable
A copy of the Information sheet/booklet of the organization.	(if available)	Not applicable
A copy of the latest certified financial statement	Required if applying for reduction of the annual fee	Not applicable
A brief CV or introduction of the applicant	No applicable	Required



**World Bank classification of the economic status of countries.**

<https://datahelpdesk.worldbank.org/knowledgebase/articles/906519-world-bank-country-and-lending-groups> For reference, as of 1 July 2020

<b>LOW-INCOME ECONOMIES</b>		
Afghanistan	Guinea-Bissau	Sierra Leone
Benin	Haiti	Somalia
Burkina Faso	Korea, Dem. People's Rep.	South Sudan
Burundi	Liberia	Syrian Arab Republic
Central African Republic	Madagascar	Tajikistan
Chad	Malawi	Tanzania
Congo, Dem. Rep	Mali	Togo
Eritrea	Mozambique	Uganda
Ethiopia	Nepal	Yemen, Rep.
Gambia, The	Niger	
Guinea	Rwanda	
<b>LOWER-MIDDLE INCOME ECONOMIES</b>		
Angola	India	Papua New Guinea
Bangladesh	Indonesia	Philippines
Bhutan	Kenya	São Tomé and Príncipe
Bolivia	Kiribati	Senegal
Cabo Verde	Kyrgyz Republic	Solomon Islands
Cambodia	Lao PDR	Sudan
Cameroon	Lesotho	Timor-Leste
Comoros	Mauritania	Tunisia
Congo, Rep.	Micronesia, Fed. Sts.	Ukraine
Côte d'Ivoire	Moldova	Uzbekistan
Djibouti	Mongolia	Vanuatu
Egypt, Arab Rep.	Morocco	Vietnam
El Salvador	Myanmar	West Bank and Gaza
Eswatini	Nicaragua	Zambia
Ghana	Nigeria	Zimbabwe
Honduras	Pakistan	
<b>UPPER-MIDDLE-INCOME ECONOMIES</b>		
Albania	Fiji	Montenegro
American Samoa	Gabon	Namibia
Argentina	Georgia	North Macedonia
Armenia	Grenada	Paraguay
Azerbaijan	Guatemala	Peru
Belarus	Guyana	Russian Federation
Belize	<b>Indonesia</b>	Samoa
Bosnia and Herzegovina	Iran, Islamic Rep.	Serbia
Botswana	Iraq	South Africa
Brazil	Jamaica	St. Lucia
Bulgaria	Jordan	St. Vincent and the Grenadines
China	Kazakhstan	Suriname
Colombia	Kosovo	Thailand

Costa Rica	Lebanon	Tonga
Cuba	Libya	Turkey
Dominica	Malaysia	Turkmenistan
Dominican Republic	Maldives	Tuvalu
Equatorial Guinea	Marshall Islands	Venezuela, RB
Ecuador	Mexico	
<b>HIGH-INCOME ECONOMIES</b>		
Andorra	Greece	Palau
Antigua and Barbuda	Greenland	Panama
Aruba	Guam	Poland
Australia	Hong Kong SAR, China	Portugal
Austria	Hungary	Puerto Rico
Bahamas, The	Iceland	<b>Romania</b>
Bahrain	Ireland	Qatar
Barbados	Isle of Man	San Marino
Belgium	Israel	Saudi Arabia
Bermuda	Italy	Seychelles
British Virgin Islands	Japan	Singapore
Brunei Darussalam	Korea, Rep.	Sint Maarten (Dutch part)
Canada	Kuwait	Slovak Republic
Cayman Islands	Latvia	Slovenia
Channel Islands	Liechtenstein	Spain
Chile	Lithuania	St. Kitts and Nevis
Croatia	Luxembourg	St. Martin (French part)
Curaçao	Macao SAR, China	Sweden
Cyprus	Malta	Switzerland
Czech Republic	<b>Mauritius</b>	Taiwan, China
Denmark	Monaco	Trinidad and Tobago
Estonia	<b>Nauru</b>	Turks and Caicos Islands
Faroe Islands	Netherlands	United Arab Emirates
Finland	New Caledonia	United Kingdom
France	New Zealand	United States
French Polynesia	Northern Mariana Islands	Uruguay
Germany	Norway	Virgin Islands (U.S.)
Gibraltar	Oman	

**Guiding protocol for the assessment of reduction of the annual fee of Organisational and Associate member**

<b>Tier</b> Reduction Annual fee	Net annual balance of the organization	Membership number Of the organization
<b>Tier 1</b> 0% reduction US\$500/ year	> US\$120,000	1000+
<b>Tier 2</b> 25% reduction US\$375/ year	US\$80,000 - US\$120,000	501-1000
<b>Tier 3</b> 50% reduction US\$250/ year	US\$40,000 - US\$79,999	251-500
<b>Tier 4</b> 25% reduction US\$125/ year	US\$10,000 - US\$39,999	100-250
<b>Tier 5</b> 95% reduction US\$25/ year	Below US\$10,000	< 100

**The assessment will be based on the financial status (net annual balance, income, expenditure, cumulative reserve fund) and the size of the organization as a reference and will be applied as appropriate.**