Joining the IKCC Network: Application Form

Please email the completed and signed form to:
Julia Black
IKCC Project Coordinator
contact@ikcc.org

IKCC is an independent and democratic network of patient support and advocacy organisations established with the mission of improving the lives of kidney cancer patients and their families globally. IKCC provides information, support and assistance to national and regional kidney cancer organisations. All organisations and individuals with a specific focus on kidney cancer are welcome to apply for membership. IKCC does not charge any membership fees at this time.

Category of Membership:

Supporter

IKCC is a registered legal entity, a non-profit foundation in the Netherlands registered as:
Stichting IKCC, Reg.-No. KvK 62070665

By completing, signing and submitting this application form we / I acknowledge and fully accept the IKCC’s constitution (Deed of Incorporation) dated 9th December 2014.
(The Deed of Incorporation can be downloaded in Dutch and English at www.ikcc.org)

Stichting IKCC
International Kidney Cancer Coalition
Administrative Office: Caspar-Bender-Weg 31, 61200 Wölfersheim-Södel, Germany
Joining IKCC as a Supporter:

Organisations not yet meeting the full criteria of an Affiliate Organisation or individuals with an interest in kidney cancer patient support and advocacy may join IKCC as a Supporter. Supporters do not have voting rights in matters pertaining to the IKCC.

☐ I wish to apply to join IKCC as a Supporter

More details about my interest/motivation to join and support the IKCC:

My contact details for IKCC:

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Terms of Agreement

These terms of agreement apply to Supporters.

I understand participation in IKCC is free of charge at this time. However, such a network depends on the active participation of the supporters, therefore engaged participations and contributions are encouraged.

I am aware IKCC welcomes corporate donations, grants and sponsorship to fund certain projects and to enable the foundation to grow and develop. All financial relations with the healthcare industry are based on our “Code of Conduct” to secure independency and transparency. (This document is publicly available and can be downloaded in English under www.ikcc.org)

I confirm the information above is correct and that I am eligible to join IKCC as defined above.

Signed:
Name:
Organisation:
Position:
Date:

Thank you for your application.

The IKCC Board of directors will review the information as submitted and reserves the right to make all final decisions regarding membership

For office use only:

Approval status:
Date:
Signature:

(2016.05.04)