NAFTNet Membership Application Form
General Information

Please submit this sheet and requested attachments to membership@naftnet.org

Center Name (Hospital/University):

Contact Names:

Primary:

Alternate:

Email:

Phone:

Fax:

Address:

Status Requested:

◯ Steering Committee
Annual Dues $2,000.00 (USD)

◯ Alumni Membership
Annual Dues $250.00 (USD)

Requested Attachments to Submit with this sheet:

Publication list from all your center's providers (up to past 5 years)
Society Memberships for Primary and Alternate
Personal Statement – Interest in NAFTNet
Letter of support from NAFTNet member (optional)

These will be sent to you by email:

Disclosure of Conflict of Interest Form (COI) for the Primary and Alternate
Annual Data Form pertaining to your center

Revised 4.30.2010