

# Supporter Membership Application

**AND Active Membership is required to be approved as a Supporter Member.**

*Please complete the following:*

Name:

AND Number:

Primary AND State Affiliation:

Mailing Address:

Phone Number:

Email Address:

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## **KSAND Supporter Membership Fees:**

**Active AND Member \$40**

**Student or Retired AND Member \$15**

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### **Instructions:**

1. Save an electronic copy for your records of the following two completed documents:
  - a. This e-application for Supporter Member
  - b. Proof of AND membership
    - i. Print a “print screen” picture of your current profile in” My Academy” at [www.eatright.org](http://www.eatright.org) or make a paper or electronic copy of your current Academy membership card.
2. Email both documents to [director@eatrightks.org](mailto:director@eatrightks.org) or mail to Kansas Academy of Nutrition and Dietetics, 1508 W. 18<sup>th</sup> Avenue, Hutchinson, KS 67502.
3. The Executive Director of KSAND will review your request and approve membership eligibility. This process may take up to 2 weeks. Please contact the Executive Director with questions or comments.
4. Make payment: Payment is made **after** account approval.
  - a. You will receive an email with payment instructions once your supporter membership is approved.
  - b. Payment options are available using credit card or check.