



TAKE ACTION!

Please join the People Like Us TAKE ACTION! & Legislative Volunteer Network

Make your voice be heard to make lives better for people with kidney disease.

As an **ADVOCATE** you will:

- **Be informed:** Receive information and sample letters on STATE and FEDERAL policy issues.
- **TAKE ACTION!** Send messages to STATE and FEDERAL legislators and policy makers.
- **Influence:** Create support for programs and policies that benefit people with kidney disease.

First: _____ Last: _____

Home (voting) Address: _____

City: _____ State: _____ Zip: _____

Phone: home: _____ work or cell: _____

E-mail (required for the e-advocacy network) _____

*** Please tell us about yourself***

Citizen Advocate

- Chronic Kidney Disease (On dialysis)
- Chronic Kidney Disease (Not on dialysis)
- Transplant Recipient
- Donor Family Member
- Living Donor

Professional Advocate

- Physician
- Nurse
- Dietician
- Social Worker
- Researcher

A partnership between the National Kidney Foundation (NKF) & National Kidney Foundation of Michigan (NKFM)

NKF Government Relations Office

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NKF of Michigan

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Please return this form to NKF of Michigan.

Mail, fax 734-222-9801, or e-mail information to lbacon@nkfm.org

