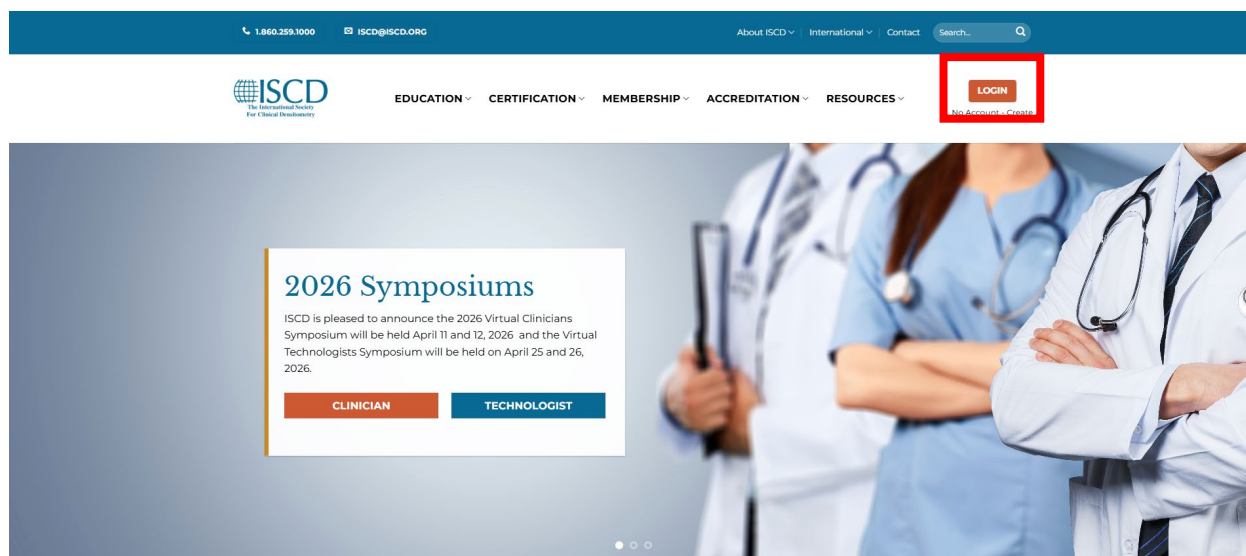
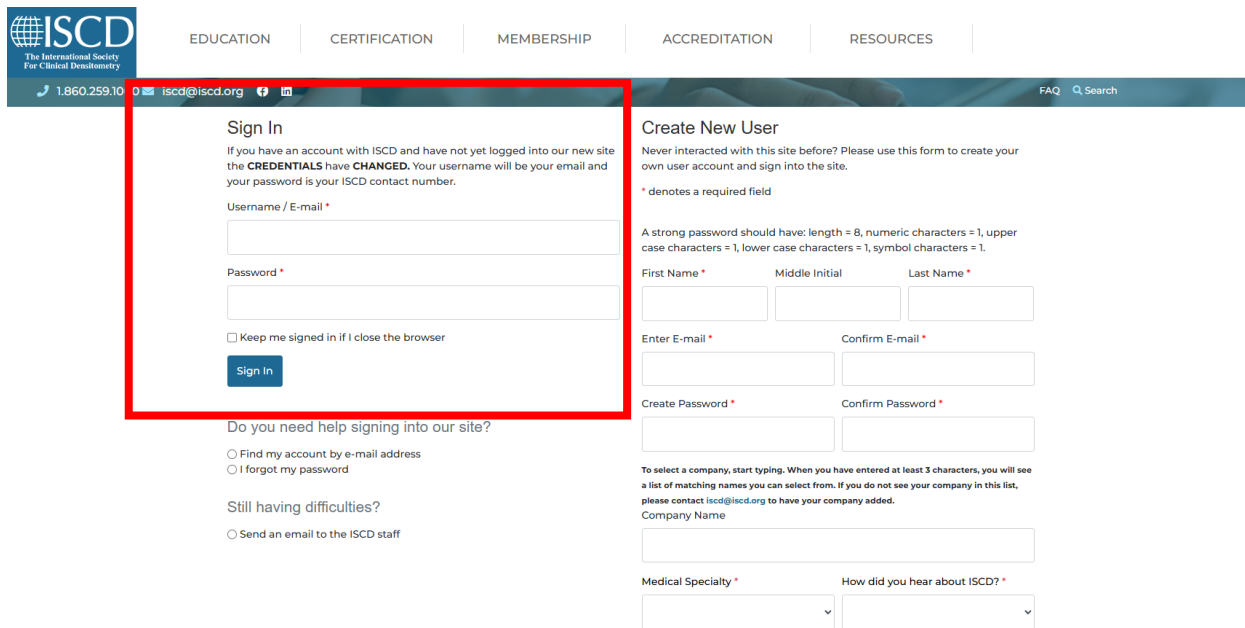


How to renew your membership online

- Start at www.iscd.org
- Click on **LOGIN** in the top right corner



- Enter your Login-email and Password, then press “Sign In”



Sign In

If you have an account with ISCD and have not yet logged into our new site the **CREDENTIALS** have **CHANGED**. Your username will be your email and your password is your ISCD contact number.

Username / E-mail *

Password *

☐ Keep me signed in if I close the browser

Sign In

Do you need help signing into our site?

☐ Find my account by e-mail address

☐ I forgot my password

Still having difficulties?

☐ Send an email to the ISCD staff

Create New User

Never interacted with this site before? Please use this form to create your own user account and sign into the site.

* denotes a required field

A strong password should have: length = 8, numeric characters = 1, upper case characters = 1, lower case characters = 1, symbol characters = 1.

First Name * Middle Initial Last Name *

Enter E-mail * Confirm E-mail *

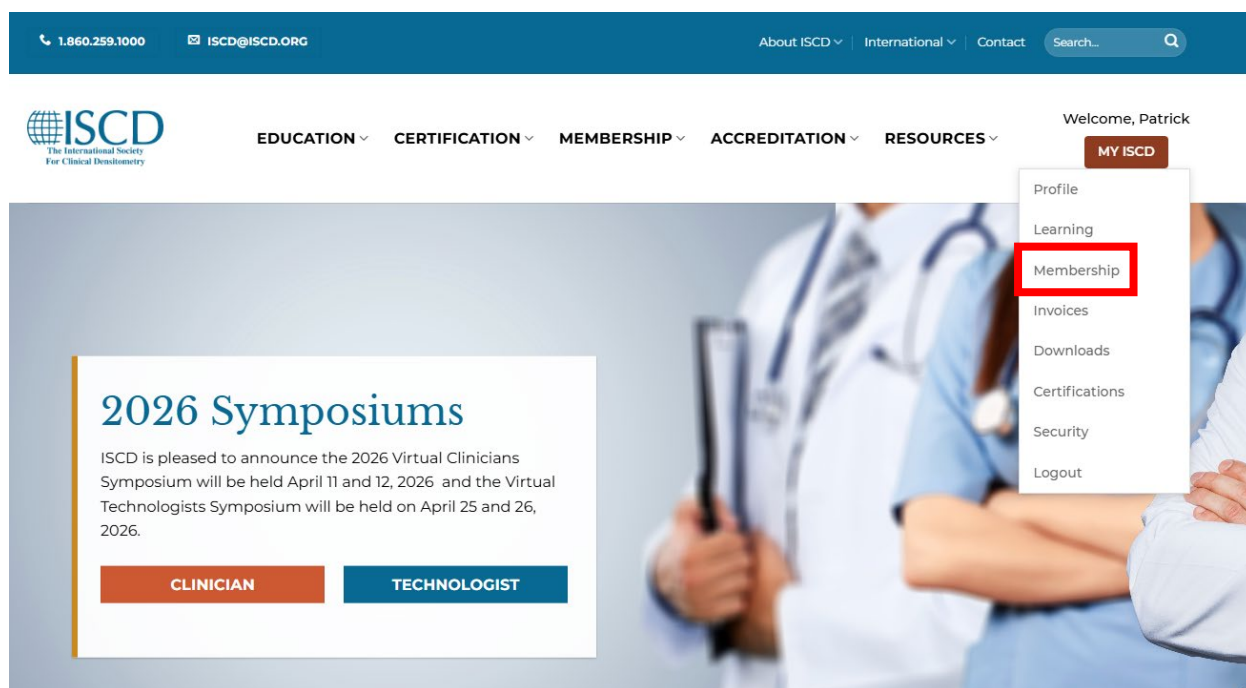
Create Password * Confirm Password *

To select a company, start typing. When you have entered at least 3 characters, you will see a list of matching names you can select from. If you do not see your company in this list, please contact iscd@iscd.org to have your company added.

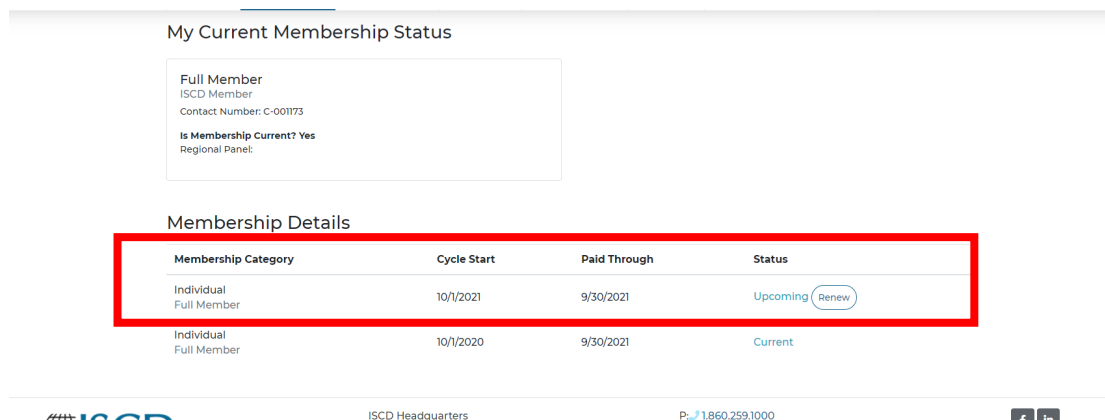
Company Name

Medical Specialty * How did you hear about ISCD? *

- Hover over “My ISCD” at the top right of the screen, then select “Membership”



- Click on the **RENEW** button next to your upcoming membership



- Select the membership level that you wish for your renewal

1

2

PROFILESUMMARY

Individual

Full Member

Applicant: Member, ISCD

Select a Membership Level

☒ Full Member - One Year Installment \$300.00
Full members receive discounts on educational courses and annual meeting, access to 12 ACCME or ASRT credits annually as well as the Journal of Clinical Densitometry, all online ISCD resources and more!

☐ Professional Member - One Year Installment \$200.00
Professional members receive access to 7 ACCME or ASRT credits annually, discounts on certification programs and services, access to the Journal of Clinical Densitometry and all ISCD online resources.

☐ Community Member - One Year Installment \$100.00
Community members receive access to our online ISCD resources and eligibility for ISCD Awards, Committees and a voter voice in Society elections.

If you reside in a country that is determined low or middle income by the World Bank, you may be eligible for a discount on your membership. Please contact iscd@iscd.org to confirm your eligibility and to process your membership.

[Contact Information](#)

- Verify that all of your contact information is accurate and that all required fields are completed, then click **NEXT STEP**

Contact Information

Prefix	First Name *	Middle Initial	Last Name *
	ISCD		Member
ISCD Credential		Designation	
Position/Title		Medical Specialty *	
DXA Machine Used *	How do you bill for Medicare?	Individual Type *	How did you hear about ISCD? *
Other		Technologist	Attended an ISCD course/ever
Primary Email *	Primary Phone	Mobile Phone	Fax
member@test.com			

< Previous

Next Step >

- If you are currently certified and are downgrading to a Membership Level that does not include your Maintenance of Certification, you will receive the following notification warning. You may choose to select a Membership level that includes your MOC.



You have selected to switch to a Community membership. Please note that this membership type does not include the Maintenance of Certification (MOC) program. If you elect to proceed with renewing your membership at the Community level, this will create a lapse in your MOC agreement and you will need to sit for the certification exam to recertify.

- You will need to review the terms and conditions of membership, click **I agree**.
- Click **Finish**

Membership Summary

Member, ISCD Edit	
Individual - Full Member	
Total: \$300.00	
Item	Price
Individual - Full Member	\$300.00
Fees	
Total:	\$300.00

If you reside in a country that is determined low or middle income by the World Bank, you may be eligible for a discount on your membership. Please contact iscd@iscd.org to confirm your eligibility and to process your membership.

Terms and Conditions

[Click here to view our Membership Terms and Conditions.](#)

☐ I agree. By checking this box, I attest that I have read the above Membership Terms and Conditions, and I agree to abide by those terms.

To submit this application please check the "I agree" checkbox above, and then press "CHECKOUT"

[< Previous](#)

[Finish >](#)

- Confirm Order Summary is correct, click **Next**.

 SHOPPING CART
  ADDRESS
  DELIVERY
  PAYMENT
  CONFIRMATION

Please scroll down to the "Next" button to proceed with the checkout process. If you do not need to select a billing address, shipping address or shipping method, you can click " Express Checkout" below to go directly to the payment form.

You currently have 1 items in your cart [Clear Cart](#)

Product	Price
Individual Expiration Date: 9/30/2022 Member, ISCD see details	\$300.00  
Subtotal	\$300.00

Enter your promotion code and/or gift card and click the "gift" icon to the right of your entry. If valid, the discount for a promo code will be calculated for each cart item where it is applicable. A Gift Card is applied to the order total, as a form of payment. You can enter multiple promo codes/gift cards, but only one promo code can be applied to a particular purchase.





[< Home](#)
[Next >](#)

Order Summary

1 Item selected	
Subtotal	\$300.00
Sales Tax	\$0.00
Order Total	\$300.00

- Complete payment information and click **Submit Order**

 SHOPPING CART
  ADDRESS
  DELIVERY
  PAYMENT
  CONFIRMATION

Payment Information

Name on Card: *

Card Type: American Express Card Number: *





Expiration Month: 1-Jan
 Expiration Year: 2020
 Card Verification #: *

Card Address - Street: *

City: * Middletown
 State: * CT
 Zip Code: * 06457

The amount to be charged to your credit card is: \$300.00

[< Previous](#)
[Submit Order >](#)

Order Summary

1 Item selected Change >	
Subtotal	\$300.00
Sales Tax	\$0.00
Order Total	\$300.00

Billing Address [Change >](#)
 ISCD Member
 123 Main Street
 Middletown, CT 06457
 United States

- You will then receive your **Order Confirmation**. Click **DONE** to return to your profile.

 SHOPPING CART
  ADDRESS
  DELIVERY
  PAYMENT
  **CONFIRMATION**

Order Confirmation

Thank you for your purchase!

Order SC-C-001173-4YVGI

Date of purchase: 10/5/2020
 Payment: Credit Card **** 1117
 Bill To: Member, ISCD
 Gift Card: -
 PO #:

Bill To Address

ISCD Member
 123 Main Street
 Middletown, CT 06457
 United States

Invoice	Product	Price per unit	Quantity	Discount	Taxes	Charges
INV-04444-WOV8Z4	9/30/2022 Individual, Full Member	\$300.00	1	\$0.00	\$0.00	\$300.00
						Total Charges \$300.00
						Sales Tax \$0.00
						Order Total \$300.00
						Gift Card \$0.00
						Previous Payments \$0.00
						Payment \$300.00
						Balance Due \$0.00

Done