

# Instructions for IANDS Group Affiliation Certification

Revised 09/14/2012

1. **The Group Leader should fill out the Group Affiliation annual certification.** The Group Leader should be an active IANDS member at the Supporting level or above. If you are need to **join IANDS** or **renew your membership**, go to: <http://iands.org/join> – or – <http://iands.org/renew>.
2. **PLEASE COMPLETE THIS FORM BY THE DUE DATE.**
3. Go the **RegOnline** web site: <http://regonline.com/IANDSgroupaffiliation>:

## IANDS Group Affiliation annual certification

**Welcome!** The **benefits** of becoming and remaining an **IANDS Affiliated Group** include having your Group listed on the IANDS web site, participating in the monthly Group Leaders conference calls, having access to recordings of past conference call speakers, and having access to other Group Leaders for advice on running a Group. In the future, we hope to be able to recognize our Affiliated Groups as part of IANDS' 501(c)(3) tax exemption.

The IANDS Group Affiliation Policy requires that all Affiliated Groups **certify each year that their activities adhere to IANDS policies**. In order to become and remain an Affiliated Group:

- The Group Leader needs to be an IANDS member in good standing **at the Supporting level or higher**
- The Group Leader needs to fill out the annual certification report (this registration form)
- The Group Leader needs to pay the Group Affiliation renewal fee of \$50

**Affiliated Groups need to maintain their affiliation each year.** Otherwise, we will remove the Group from the list of Groups on the web site and from the monthly conference call list. **PLEASE COMPLETE THIS FORM BY JANUARY 15, 2012!**

**If you have not filled out this annual certification form before**, start your registration by entering your email address. **If you have already completed this form**, select Change Your Existing Registration; enter the email address from last year; **review and modify the information** you reported last year and pay the annual fee for this year. **Contact the office (919-383-7940)** if you have any questions. [✉ Email Us](#)

[View or Change Your Existing Registration](#)

### Start Your Registration

\* Email Address:

\* Verify Email Address:

\* Select registration type:  Existing IANDS Group [Details](#)  
 Start up a New Group [Details](#)

You can also register a group. [Learn More](#)

Please note that additional questions are added to the annual certification from time to time, which may not appear on these sample screen shots.

4. If you are registering for the first time, go to [Section A](#)
5. If you have registered before, go to [Section B](#)

## Section A: Registering Group Affiliation for the first time

A.1. Enter your email address (2 times), select Existing Group or Start up a New Group, press Continue

**If you have not filled out this annual certification form before, start your registration by entering your email address. If you have already completed this form, select [Change Your Existing Registration](#); enter the email address from last year; review and modify the information you reported last year and pay the annual fee for this year. Contact the office (919-383-7940) if you have any questions. [Email Us](#)**

[View or Change Your Existing Registration](#)

**Start Your Registration**

- \* Email Address:
- \* Verify Email Address:
- \* Select registration type:  Existing IANDS Group [Details](#)  
 Start up a New Group [Details](#)

You can also register a group. [Learn More](#)

A.2. Enter a password and press Continue. If you have a password from a previous Regonline registration (e.g., for a previous IANDS conference) use that password. If you have forgotten the password, click Start a New Registration.

**IANDS Group Affiliation annual certification** [\(View Details\)](#)

You have registered before with our system. To automatically recall your personal information, enter your password.

**Sign In**

Email Address:

\* Password:  [Forgot Your Password?](#)

[Start a New Registration](#)

A.3. Enter your personal information:

**Personal Information**

\* Email: rgmays@gmail.com

\* Verify Email: rgmays@gmail.com

Secondary Email Address (cc Email):

\* First Name: Robert

\* Last Name: Mays

Job Title:

\* IANDS Group Name: Raleigh-Durham IANDS

\* Country: United States

\* Address Line 1: 5622 Brisbane Dr

Address Line 2:

\* City: Chapel Hill

US State/Canadian Province: North Carolina

A.4. Select Role in Group, Membership Level, etc. Press Add Another Person to list additional people in your Group (Associate Group Leader, etc.). Finally press Continue to enter the Group Affiliation information.

**Other Info**

\* Role in Group: Primary Group contact (use only once per Group!)

Check this box to include this individual on the leaders council monthly teleconference email list (optional).

The **primary contact Group Leader** must be a **current IANDS member at the Supporting level or higher**.

- [Click here to join IANDS at the Supporting level or higher](#)
- [Click here to renew your IANDS membership](#)
- [Contact the IANDS Office](#) to upgrade your membership from Basic to a higher level.

\* Current IANDS membership level: Professional

[Details](#)

\* Backup Contact Individual [Details](#): Suzanne Mays

\* Backup Contact Phone (numbers only) [Details](#): 9199291073

Backup Contact Email Address: suzannemays@gmail.com

Add Another Person or Continue

A.5. Check the Group Affiliation Fee, enter the Group's information:

Personal Information Group Affiliation Form Checkout Confirmation

**Group Affiliation Form**

\* Group Affiliation Fee 2011-12 (for primary Group contact only)  
Price: \$50.00  
Enter a discount code:

Click on "Details" to display additional information to answer field prompts!  
All fields with a red asterisk (\*) **must** be completed.

\* Enter the Group name below as it is to appear on the IANDS website listing

\* Group Start Year (yyyy)

"Primary" refers to the principal meeting to be publicized on the IANDS website.

\* Primary meeting frequency

\* Primary meeting day & time [Details](#)

\* Primary meeting facility type

\* Meeting street address

\* Meeting city name

\* Meeting state / providence / territory

\* Meeting postal / zip code

A.6. Check the Leader Agreement box and then press Continue to go to the Checkout page.

use audio / video accounts  
 have other agenda features

Group status - optional comments

Optional feedback questions / suggestions

\* Leader agreement to the IANDS Group Affiliation Certification Requirements (checking this box is equivalent to signing the Affiliation Certification request form).  
[Details](#)

**Total: \$0.00**

or

A.7. Review the charges, select the payment method, enter your information and press Finish at the bottom of the page:

Personal Information   Group Affiliation Form   **Checkout**   Confirmation

**Details**

Registrant	Email	Type	Actions
<a href="#">Robert Mays</a>	rgmays@gmail.com	Existing IANDS_Group	<a href="#">Make Changes</a>

[+ Add Another Person](#)

**Fees**




Fee	Quantity	Unit Price	Amount
Group Affiliation Fee 2011-12	1	\$50.00	\$50.00
Subtotal:			\$50.00
Total:			\$50.00

**Payment Method**

Select a payment method:

**Billing Information**

Credit Card Type:

\* Credit Card Number:

\* Expiration Date:

\* Cardholder Name:

Country:

\* Billing Phone:

\* Billing Address Line 1:

\* Billing City:

\* Billing State / Province:

Billing Zip / Postal Code:

A.8. Thank you for registering your Group as an IANDS Affiliate!



## Section B: Registering when you have registered before

### B.1. Select View or Change Your Existing Registration

### IANDS Group Affiliation annual certification

Welcome! The **benefits** of becoming and remaining an **IANDS Affiliated Group** include having your Group listed on the IANDS web site, participating in the monthly Group Leaders conference calls, having access to recordings of past conference call speakers, and having access to other Group Leaders for advice on running a Group. In the future, we hope to be able to recognize our Affiliated Groups as part of IANDS' 501 (c) (3) tax exemption.

The IANDS Group Affiliation Policy requires that all Affiliated Groups **certify each year that their activities adhere to IANDS policies**. In order to become and remain an Affiliated Group:

- The Group Leader needs to be an IANDS member in good standing **at the Supporting level or higher**
- The Group Leader needs to fill out the annual certification report (this registration form)
- The Group Leader needs to pay the Group Affiliation renewal fee of \$50

**Affiliated Groups need to maintain their affiliation each year.** Otherwise, we will remove the Group from the list of Groups on the web site and from the monthly conference call list. **PLEASE COMPLETE THIS FORM BY JANUARY 15, 2012!**

If you have not filled out this annual certification form before, start your registration by entering your email address. If you have already completed this form, select Change Your Existing Registration; enter the email address from last year; **review and modify the information** you reported last year and pay the annual fee for this year. **Contact the office (919-383-7940)** if you have any questions. [✉ Email Us](#)

[View or Change Your Existing Registration](#)

**Start Your Registration**

\* Email Address:

\* Verify Email Address:

\* Select registration type:  Existing IANDS Group [Details](#)  
 Start up a New Group [Details](#)

You can also register a group. [Learn More](#)

### B.2. Enter your email address and password, and press Continue. If you forgot your password, select Forgot Your Password? to have the password reset.

### IANDS Group Affiliation annual certification [\(View Details\)](#)

**Sign In**

\* Email Address:

\* Password:  [Forgot Your Password?](#)

[Start a New Registration](#)

B.3. This is the **main Review Screen**. Select the Primary Attendee Personal Information:

## IANDS Group Affiliation annual certification [\(View Details\)](#)

Robert Mays's Group - 2 attendees

- [View, Print, or Email Registration Record and Receipt](#)
- [Cancel Entire Group](#)

Registrant	Type	Edit	Actions
1. Robert Mays <b>Primary Attendee</b>	Existing IANDS Group	<a href="#">Personal Information</a> <a href="#">Group Affiliation Form</a>	<a href="#">Substitute</a>
2. Suzanne Mays	Existing IANDS Group	<a href="#">Personal Information</a>	<a href="#">Substitute</a> <a href="#">Cancel</a>

[+ Add Another Person](#)

B.4. Review this person's information, modify as needed or there may be new required questions. Press Continue:

### Personal Information

\* Email: mays@ieee.org

\* Verify Email: mays@ieee.org

Secondary Email Address (cc Email):

\* First Name: Robert

\* Last Name: Mays

Job Title:

\* IANDS Group Name:

\* Country:

\* Address Line 1:

\* Role in Group:

Check this box to include this individual on the leaders council monthly teleconference email list (optional).

The **primary contact Group Leader** must be a **current IANDS member at the Supporting level or higher**.

- [Click here to join IANDS at the Supporting level or higher](#)
- [Click here to renew your IANDS membership](#)
- [Contact the IANDS Office](#) to upgrade your membership from Basic to a higher level.

\* Current IANDS membership level:  [Details](#)

\* Backup Contact Individual [Details](#):

\* Backup Contact Phone (numbers only) [Details](#):

Backup Contact Email Address:

B.5. You are brought back to the **main Review Screen**. Select another person's Personal Information, review and modify it as needed and press Continue. Finally, select Group Affiliation Form:

**! Your registration has not yet been saved. To update your registration, click Continue.**

Robert Mays's Group - 2 attendees

- [View, Print, or Email Registration Record and Receipt](#)
- [Cancel Entire Group](#)

Registrant	Type	Edit	Actions
1. Robert Mays Primary Attendee	Existing IANDS Group	<a href="#">Personal Information</a> <a href="#">Group Affiliation Form</a>	<a href="#">Substitute</a>
2. Suzanne Mays	Existing IANDS Group	<a href="#">Personal Information</a>	<a href="#">Substitute</a> <a href="#">Cancel</a>

[+ Add Another Person](#)

B.6. Check the Group Affiliation Fee for the current year. Note that all previous fees are also listed and included in the total at the end of the page. **You will be charged only for the current year's fee.** New questions may appear on the form, from time to time.

**Group Affiliation Form**

\* Group Affiliation Fee 2012-13 (for primary Group contact only)  
Price: \$50.00  
Enter a discount code:

\* Group Affiliation Fee 2011-12 (for primary Group contact only)  
**You have already received credit for this charge.**  
**No new charge this year** but it will appear in the total below.  
Price: \$50.00

Click on "Details" to display additional information to answer field prompts!  
All fields with a red asterisk (\*) **must** be completed.

\* Enter the Group name below as it is to appear on the IANDS website listing

\* Group Start Year (yyyy)

Group Start Month (mm)

\* Are you interested in possibly joining IANDS' group exemption?

[Details](#)



B.7. Review the Group Affiliation information and modify it as needed:

The screenshot shows a form with the following fields and values:

- Primary meeting frequency: Monthly
- Primary meeting day & time: Second or third Tuesday evening of the month
- Primary meeting facility type: Private home
- Meeting street address: 5622 Brisbane Dr
- Meeting city name: Chapel Hill
- Meeting state / providence / territory: NC
- Meeting postal / zip code: 27514
- Meeting directions: Unless otherwise announced, meetings are at the Mays home: 5622 Brisbane Dr, a few miles north of Chapel Hill, just north of I-40, off Mount Sinai Road. If you need more information or directions, please contact us at 919-929-1073 or mays@jee.org .
- Primary meeting attendance data (for past 12 months):
  - How many primary Group mtgs have you held in the last 12 months?: 7 - 12
  - Average participants: 10
  - Maximum participants: 25

Arrows from the text above point to the 'Primary meeting frequency', 'Primary meeting day & time', 'Primary meeting facility type', 'Meeting street address', 'Meeting city name', 'Meeting state / providence / territory', 'Meeting postal / zip code', 'Meeting directions', 'How many primary Group mtgs have you held in the last 12 months?', 'Average participants', and 'Maximum participants' fields.

B.8. At the bottom of the form, note that you continue to agree to the Group Affiliation Requirements. Also note that the fees for all prior years are included in the total but you will be charged only this year's Affiliation fee. Then press Continue at the bottom:

The screenshot shows the bottom of the form with the following content:

- \* Leader agreement to the IANDS Group Affiliation Certification Requirements (checking this box is equivalent to signing the Affiliation Certification request form).  
[Details](#)
- If you have registered in prior years, those charges will be included in this total. You will need to pay only this year's new Affiliation fee.**
- Total: \$100.00**
- 
- or

Arrows from the text above point to the 'Leader agreement' checkbox, the bolded text about prior years' fees, the 'Recalculate Total' button, and the 'Continue' button.

B.9. You are brought back to the **main Review Screen** again. You may also need to change the other Personal Information, if there are new required questions. Now press Continue to complete the registration.

**! Your registration has not yet been saved. To update your registration, click Continue.**

**Robert Mays's Group - 2 attendees**

- [View, Print, or Email Registration Record and Receipt](#)
- [Cancel Entire Group](#)

Registrant	Type	Edit	Actions
1. Robert Mays Primary Attendee	Existing IANDS Group	<a href="#">Personal Information</a> <a href="#">Group Affiliation Form</a>	<a href="#">Substitute</a>
2. Suzanne Mays	Existing IANDS Group	<a href="#">Personal Information</a>	<a href="#">Substitute</a> <a href="#">Cancel</a>

[+ Add Another Person](#)

B.10. Review the charges. **NOTE that the fees listed are cumulative, including prior years. Only the current year fee will be charged at this time.**

**PLEASE NOTE: The Fees listed here are cumulative, including prior years. Only the current year fee will be charged now.**

**IANDS Group Affiliation annual certification 2012-13**  
(due November 1, 2012) [\(View Details\)](#)

Personal Information | Group Affiliation Form | **Checkout** | Confirmation

**Details**

Registrant	Email	Type	Actions
<a href="#">+ Robert Mays (Primary Registrant)</a>	mays@ieee.org	Existing IANDS Group	<a href="#">Make Changes</a>
<a href="#">+ Suzanne Mays</a>	suzannemays@gmail.com	Existing IANDS Group	<a href="#">Make Changes</a>   <a href="#">Cancel</a>

[+ Add Another Person](#)

**Fees**

Fee	Quantity	Unit Price	Amount
Group Affiliation Fee 2010-11	1	\$50.00	\$50.00
Group Affiliation Fee 2012-13	1	\$50.00	\$50.00
Group Affiliation Fee 2010-11	1	\$0.00	\$0.00
Group Affiliation Fee 2011-12	1	\$50.00	\$50.00
Subtotal:			\$150.00
Total:			\$150.00

Your total includes a group discount ending of \$50.00



B.11. Review the previous transactions and payments:

Transaction Type	Date	Amount	Balance
<a href="#">Previous Transactions</a>			
Transaction Amount	8/17/2010	\$50.00	\$50.00
Online Credit Card Payment <a href="#">Details</a>	8/17/2010	(\$50.00)	\$0.00
Transaction Amount	11/10/2011	\$50.00	\$50.00
Online Credit Card Payment <a href="#">Details</a>	11/10/2011	(\$50.00)	\$0.00
Previous Balance:			\$0.00
Net Changes to Fees:			\$50.00
Current Balance:			\$50.00

B.12. Select a payment method to pay the Group Affiliation fee. Press Finish at the bottom.

**Payment Method**  
Select a payment method:

**Billing Information**

Credit Card Type:   
  

\* Credit Card Number:

\* Expiration Date:

\* Cardholder Name:

Country:

\* Billing Phone:

\* Billing Address Line 1:

\* Billing City:

\* Billing State / Province:

Billing Zip / Postal Code:

B.13. **Thank you for re-registering your Group as an IANDS Affiliate!**