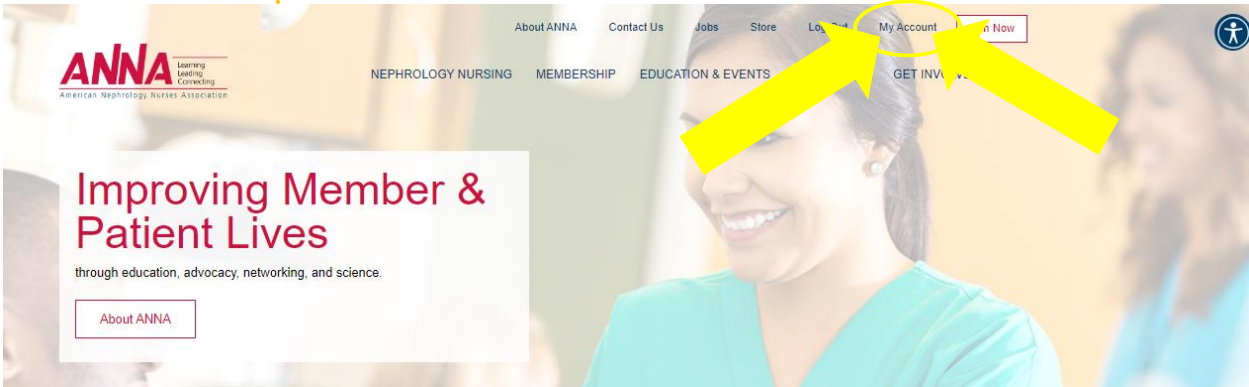


# How to Update Your ANNA Account Preferences

- Go to [www.annanurse.org](http://www.annanurse.org) to begin.
- Go to “My Account” (Note: You will see “Log In” if you are not signed into your account prior, please proceed with logging in to access your account.)



- You will then be in your account profile and can edit your account here.

## My Profile

Go Back

Association: ANNA / Membership Type: Staff / Expires: 12/31/2025 / Member#: 1140218313 [Member Card](#)

NO PHOTO

Pitman, NJ 08071-0056

emily.p

Edit Co

Profile Details (Visible Online: Yes) [Edit Primary Info](#)

Name: Emily Parry  
Title: Membership Services Coordinator  
Company: American Nephrology Nurses Association

PO Box 56  
Pitman, NJ, 08071-0056  
UNITED STATES

[Edit Demographics](#)

My Account Links

- [My Profile](#)
- [My Full Profile](#)
- [My Full Contact Info](#)
- [My Social Communities Links](#)
- [My Invoices](#)
- [My Membership](#)
- [My Events](#)
- [My Credits](#)
- [My Downloads](#)
- [My Committees](#)
- [My Saved Payment Info](#)
- [My Orders](#)
- [Change My Password](#)

To update additional account preferences, such as opting in to receive electronic copies of the ANNA Update or Nephrology Nursing Journal, click here

Questions? Contact Emily Parry, Membership Services Coordinator, at [Emily.parry@annanurse.org](mailto:Emily.parry@annanurse.org) or 856-256-2320

### My Profile

Association: ANNA / Membership Type: Staff / Expires: 12/31/2025 / Member#: 1140218313 Member Card

**NO PHOTO** Edit

Pitman, NJ 08071-0056  
 emily.parry@annanurse.org

Edit Contact Info Edit Social Links

**Profile Details (Visible Online: Yes)**

**Name:** Emily Parry  
**Title:** Membership Services Coordinator  
**Company:** American Nephrology Nurses Asso

*Pitman, NJ, 08071-0056  
 UNITED STATES*

**Update Employer**

**Update areas of practice**

**My Recent Invoices**

Invoice	Invoice Date	Total	Pay
815477	05/25/2022	\$12.00	\$12
815478	05/25/2022	\$12.00	\$12
815493	05/24/2022		\$60
815494	05/24/2022		\$24
815495	05/24/2022		\$24

**Join discussion groups**

**Check boxes ONLY if you wish to opt out of receiving print copies of these publications**

**Edit Demographics**

Who asked you to join ANNA? :

Licensure :

Primary Position :

Years in Nephrology Nursing :

Years in Current Position :

Highest Nursing Degree (RNs only) :

Highest Non-Nursing Degree Completed (if applicable) :

Practice Setting/Employer :

Areas of Practice. Instructions: Hold Ctrl Key (Cmd Key) to select multiple Areas of Practice. :

Are you a member of your state nursing association (i.e. ANA)? :

Certification Status :

Specialty Practice Networks Email Discussion Group(s). Instructions: Hold down Ctrl Key (Cmd Key) to select multiple Specialty Practice Networks. :

I do NOT wish to participate in the ANNA Connected Open Forum :

Gender :

Ethnicity :

"Go Green" - I do NOT wish to receive my Nephrology Nursing Journal by mail. :

"Go Green" - I do NOT wish to receive my ANNA Update newsletter by mail. :

Save Cancel

**Questions? Contact Emily Parry, Membership Services Coordinator, at [Emily.parry@annanurse.org](mailto:Emily.parry@annanurse.org) or 856-256-2320**