



INNOVATION RESEARCH INTERCHANGE

Accelerating Value Creation

INNOVATION RESEARCH INTERCHANGE
formally known as Industrial Research Institute, Inc.
2019 APPLICATION FOR ASSOCIATE MEMBERSHIP

(For confidential use by Board of Directors and Membership Committee)

(LABORATORYNAME)

(DATE)

(DEPARTMENT,IFAPPLICABLE)

(AGENCY,IFAPPLICABLE)

Laboratory mission, principle areas of R&D activities (e.g., optics, chemicals, electronics) and location(s) of R&D facilities:

Select Membership Level (circle one): Standard (\$15,750) Silver (\$21,250) Gold (\$26,350)

Please designate the following persons to represent the company in IRI.

Primary Representative

Alternate Representative

Name:
Title:
Address:
Phone:
Fax:
Email:
Special Interests:
Admin Asst. Name:
Admin Asst. Phone:
Admin Asst. Email:

Name:
Title:
Address:
Phone:
Fax:
Email:
Special Interests:
Admin Asst. Name:
Admin Asst. Phone:
Admin Asst. Email:

I give IRI permission to store the information provided as it is necessary in order to process this membership application form. IRI will not share any personal information without your consent. I understand I can request to have the information removed at any time.

(SIGNATURE)