



(COMPANY)

(DATE)

Principal products and/or services: _____

Company website: _____

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

Tier II - \$5,000

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

Voting Representative

Alternate Representative

Name: _____

Name: _____

Title: _____

Title: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Fax: _____

Fax: _____

Email: _____

Email: _____

Special Interests: _____

Special Interests: _____

Admin Asst. Name: _____

Admin Asst. Name: _____

Admin Asst. Phone: _____

Admin Asst. Phone: _____

Admin Asst. Email: _____

Admin Asst. Email: _____

Please check both boxes in order for Application to be accepted.

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.

The above named Voting Representative is qualified to represent our research, development and/or engineering functions, authorized to participate in all activities of the Institute, and to vote on our behalf.

(SIGNATURE)

(TITLE)