

APPLICATION FOR MEMBERSHIP

Company: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Key Contact Name: _____ Title: _____

Phone/(800#): _____ Fax: _____

E-Mail: _____ Web Address: _____

(Be sure to include e-mail and web address in order for links to be included in your web listing on the RIMA-I site.)

Provide a clear description of your company's business activities: _____

Name of Sponsoring Member Company: (if applicable) _____

Special Introductory Membership Offer: To help companies get connected and learn more about what RIMA-I is doing, a progressive 3-year dues program has been approved for NEW members as follows:

- | | |
|--|--|
| <input type="checkbox"/> Full/Active Membership: | 1 st Year - \$1,500 Annual Dues |
| | 2 nd Year - \$3,500 Annual Dues |
| | 3 rd Year - \$7,500 Annual Dues |

NOTE: You are not obligated to all three years when you join. The discount applies if you choose to renew.

NEW International Only Membership:

- International Only (do not sell in North America): \$1,500 Annual Dues

How did you hear about RIMA International? _____

Do you presently belong to any other clubs, associations or affiliations? Yes _____ No _____

If yes, please list *(required)*: _____

COMMITTEES- Please select committee(s) of which you would like to actively participate:

NOTE: This is where most of the work is done. If you want a voice on any of these topics, please sign up to participate on the committee.

- | | | |
|--|---|---|
| <input type="checkbox"/> PR/Marketing/Membership | <input type="checkbox"/> Technical | <input type="checkbox"/> Strategic Alliance Committee |
| <input type="checkbox"/> Verification | <input type="checkbox"/> International Conference | <input type="checkbox"/> Code & Legislative Committee |

Signature of Applicant _____ Date _____

Title or Position _____

NOTE: In order to process your application, all information on this form must be completed. Please read and sign the RIMA International Code of Ethics and 'Full/Active' member applicants please complete the Technical Data Compliance Form and return them with application and payment to the address shown below.