

Application for Membership

Company / Organization				
Address Where Incorporated or Registered				
Primary Contact Name				
Primary Contact Email				
Primary Contact Phone				
Please refer to the HRCS Fees Schedule for the following entity: For-Profit				
Organization Type:				
Supplier				
Desired Membership Level: Bronze				
	Strategic Faither			

Thank you. We will contact you to discuss your Membership Application. An Application for Membership in HRCS is not a guarantee of acceptance. Once your Application has been approved, you will be asked to sign a Membership Agreement and pay the requisite fees for your approved level in order to activate your Membership.

If you have further questions about HRCS or membership, please contact Peter Grau at: peter.grau@sae-itc.org

M	ember		SAE Industry Technologies Consortia	
Si	gnature		Signature	
Organization:			Health-Ready Components & Systems	
Name:			Name:	
Title:			Title:	
Date:			Date:	
Approved Membership Level		p Level	Membership Fees	
	Bronze	\$3,000	Annual:	
] Silver	\$6,000		
	Gold	\$9,000		
	Strategic Partner	(By Invitation)		
Additional Member Contact Name:				
Additional Member Contact Title:				
Additional Member Contact Email:				
Additional Member Contact Phone:				
A	Additional Member Contact Mailing Address:			