



Application for Membership

Company / Organization	
Address Where Incorporated or Registered	
Primary Contact Name	
Primary Contact Email	
Primary Contact Phone	

The entity is:

For-Profit <input type="checkbox"/>	Non-Profit <input type="checkbox"/>	Government <input type="checkbox"/>	Academia <input type="checkbox"/>
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Organization Type:

Supplier <input type="checkbox"/>	Integrator <input type="checkbox"/>	Manufacturer <input type="checkbox"/>	Operator <input type="checkbox"/>	Other <input type="checkbox"/>
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Desired Membership Level:

Bronze <input type="checkbox"/>	Silver <input type="checkbox"/>	Gold <input type="checkbox"/>	Strategic Partner <input type="checkbox"/>
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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

Member

SAE Industry Technologies Consortia

Signature

Signature

Organization:

Health-Ready Components & Systems

Name:

Name:

Title:

Title:

Date:

Date:

Approved Membership Level

Membership Fees

- Bronze \$3,000
- Silver \$6,000
- Gold \$9,000
- Strategic Partner (By Invitation)

Annual:

Additional Member Contact Name:

Additional Member Contact Title:

Additional Member Contact Email:

Additional Member Contact Phone:

Additional Member Contact Mailing Address: