

ITA MEMBERSHIP APPLICATION

First Name:

Middle:

Last Name:

Title:

Nickname:

Organization:

Department:

Mailing Address:

Overnight/Street Address:

City:

State/Province:

Postal Code:

Country:

Telephone (include area code):

Fax (include area code):

Alt Phone (include area code):

E-mail Address:

Internet Web Address:

ITA MEMBERSHIP CATEGORIES

Public/Private Utility Member

Based on Utility Service Population

- Less Than 100,000 (\$255)
- 100,000 to 200,000 (\$510)
- 200,000 to 300,000 (\$760)
- 300,000 to 400,000 (\$1015)
- 400,000 to 500,000 (\$1,265)
- 500,000 to 600,000 (\$1,520)
- 600,000 to 700,000 (\$1,770)
- 700,000 to 800,000 (\$2,025)
- 800,000 to 900,000 (\$2,280)
- 900,000 to 1 Million (\$2,530)
- Greater Than 1 Million (\$3,800)

ITA Research/Special Project Funding

Further ITA's mission by supporting and encouraging research and development. Contribute to help meet the growing need for instrumentation and automation research and special project

- funding. Optional Contribution:* \$1,000
 \$1,500 \$2,000 \$2,500 \$3,000
 \$4,000 \$5,000 \$6,000 \$8,000
 \$10,000 \$15,000 \$25,000
 Other \$ _____ (please specify)

Manufacturer Member

Based on Annual Gross Sales

- Less than \$1 Million (\$950)
- \$1 to 3 Million (\$1,770)
- \$3 to 5 Million (\$3,165)
- \$5 to 10 Million (\$3,800)
- \$10 to 25 Million (\$5,695)
- \$25 to 50 Million (\$6,325)
- \$50 to 100 Million (\$7,590)
- More than \$100 Million (\$8,855)

- Regulatory Agency* (\$1,100)
- Academic Organization* (\$275)
- Non-Profit Organization* (\$275)
- Individual Member – Employed by a Member Organization* (\$95)
- Individual Member – 10% Pubs Discount* (\$140)

Consultant and Manufacturer Representative Members

Based on Corporate Size

- Less than 5 Employees (\$315)
- 5 to 20 Employees (\$630)
- 20 to 50 Employees (\$950)
- 50 to 100 Employees (\$1,265)
- 100 to 150 Employees (\$1,900)
- More than 150 Employees (\$2,530)

Industrial Member

Based on Number of Corporate Treatment Facilities

- 1 (\$820)
- 2 to 5 (\$1,200)
- More than 5 (\$1,580)

Payment Information

- Check Enclosed (*payable to ITA in U.S. dollars*)
- Purchase Order (# _____)
- MasterCard, Visa, American Express (*circle one*)
Card # _____ Expiration Date: _____
- Signature: _____

*Please submit application with payment (payable in U.S. dollars to ITA) at:
Instrumentation Testing Association (ITA)
3015 SW Pine Island Rd #113-441
Cape Coral, FL 33991-1704, USA*

*For questions or inquiries please contact ITA:
Tel: (702) 568-1445 Fax: (702) 568-1446
E-mail: ita.instrument@earthlink.net
WEB: <http://www.instrument.org>
EIN: 36-330-4650*