

FMP Alliance, Inc.

Membership Application

Please complete and submit two copies of this application to FMP Alliance, Inc. (“FMP Alliance”), together with the appropriate membership fee (as calculated below) or a request for invoice, if required by your organization. Membership rights and privileges will not commence until payment in full of membership fees have been received by FMP Alliance.

Name of Applicant: _____

Address of Applicant: _____

Business Contact: _____

Phone No: _____ E-Mail: _____

All legal and financial notices from FMP Alliance to the member will be sent to this e-mail address unless the member directs otherwise

Technical Contact: _____

Phone No: _____ E Mail: _____

All technical notices from FMP Alliance to the member will be sent to this e-mail address unless the member directs otherwise

Please select the desired Membership class:

Class	Dues
____ Principal	\$15,000
____ Contributing	\$10,000
____ Adopter	\$5,000

By signing below, the applicant acknowledges and agrees that, when signed and accepted by FMP Alliance, this application represents a binding contract between the parties and commits the applicant to (i) payment of annual Membership dues and fees as determined from time to time by the Board of Directors and (ii) comply with all the terms and conditions of FMP Alliance’s Certificate of Incorporation, Bylaws and Intellectual Property Rights Policy (the applicant hereby acknowledging receipt of copies of these documents), each as from time to time amended, and such rules and policies as the Board of Directors and/or committees may from

time to time adopt. The applicant certifies that it meets the conditions of Membership specified in the Bylaws.

NOTE: Membership renews automatically unless FMP Alliance receives notice of non-renewal no later than November 30 of the current membership year.

Applicant Authorization:

Accepted:

(Print Applicant Name)

FMP ALLIANCE , INC.
INC.

By: _____
(signature)

By: _____
(signature)

Name: _____

Name: _____

Title: _____

Title: _____

Date: _____

Date: _____