

Membership Application

COMPANY INFORMATION

Company Name		
Primary/Voting Representative		
Email		Phone
Address		Fax
City	State	Zip Code
Alternate Contact 1		
Email		Phone
Alternate Contact 2		
Email		Phone
PAYMENT INFORMATION		
Credit Card Number (AmEx, MC, VISA)		Exp. Date
Name on Credit Card		
Address		
City	State	Zip Code
Amount*	*See dues structure be	
For wire transfer details, please call 202.721.4149 or email accounting@socma.org . Thank you.		
Send payments to SOCMA/BPSA, 1850 M Street, NW, Suite 700, Washington, DC 20036-5810		
2017 DUES STRUCTURE		
Tier 1 Manufacturers: those companies in the Single Use production sector with sales of less than \$2M or are non-manufacturers of Single Use		
products or components, such as engineering and design houses, service providers or contract laboratories: Annual Dues: \$3,295		
Tier 1 End Users: those companies that are categorized as "small bio-pharma" or pharmaceutical concerns and/or bio-tech companies, with fewer than		
100 employees: Annual Dues: \$3,295		
Tier 2 Manufacturers: those companies manufacturing components used in Sir	ale Use Systems, with sa	les of \$2M or more: Annual Dues: \$6.590 Tier
2 End Users: bio-pharma or bio-tech companies with 100+ employees: Annual Dues: \$6,590		
SIGNATURE	+ .,	
I authorize the verification of the information provided on this form. I have received a copy of this application.		
Signature of applicant		Date

Fax completed application to BPSA, **202.296.8556**. For more information or details on membership benefits, please contact **ottk@socma.com**.