

Member Information (Please print clearly)

W

Prefix _____ First Name (no initials) _____ Middle Initial _____ Last Name _____
 Informal Name / Name to be used on name badge _____
 Gender Female Male _____ Job / Occupation Title _____
 Company Name or Organization _____

Check Mail Preference

Business Street Address _____ Suite _____ P.O. Box _____
 Mail Stop Code _____ City or Suburb _____ State / Province _____
 Zip+4 / Postcode _____ Country _____ Business Telephone _____
 Business Fax _____ Business E-mail Address _____

Home Address (for office use only) _____
 City or Suburb _____ Apartment _____
 State / Province _____ Zip+4 / Postcode _____
 Home Telephone _____ Home Fax _____ Mobile (optional) _____
 Alma Mater _____
 Home E-mail Address _____

- I wish to keep my data confidential and only used by ISPE and its local Affiliates and Chapters.
 I **DO NOT** want to be included in the Membership Directory or Conference Attendee listings.

MEMBERSHIP CATEGORIES AND PAYMENT INFORMATION - All Members of ISPE are entitled to vote on matters pending before the Society, hold office, and serve on committees. Memberships are individual and not transferable. For membership category descriptions, bylaws, and the Student Membership Application, visit www.ISPE.org/membership.

- Active Members:** US Dollars \$200 Euros €190 Complimentary - Included with Nonmember 2007 ISPE Annual Meeting Registration Fee
 \$60/€60 of your dues is allocated to your subscription to *Pharmaceutical Engineering*. Renewal rate is \$160/€150 when received by due date.
- Public Authority/Government Members:** US Dollars \$30* Euros €30*
- Academic Institutional Members:** US Dollars \$30* Euros €30*
- Emerging Economy Members:** Visit www.ISPE.org/emergingeconomylist for a list of eligible countries. Membership includes Members-only access to the ISPE Web site and on-line access to *Pharmaceutical Engineering*. US Dollars \$30 Euros €30

Payment or credit card information MUST accompany application. No purchase orders accepted. FEI #59-2009272

Check enclosed payable to ISPE # _____ in the amount of \$ _____ (drawn on a US bank) or € _____
 Credit Card Type: VISA MC/EUROCARD AMEX
 Card Number _____ Exp. Date _____

Name of Cardholder (as it appears on card) _____
 Cardholder Signature _____

* \$15/€15 of your dues is allocated to your subscription to *Pharmaceutical Engineering*.
 Prices good through 31 December 2007; after 31 December 2007, please contact ISPE for current rates. Members may not deduct the subscription price from dues

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**WHAT IS YOUR PRIMARY COMPANY TYPE?
(select one)**

Manufacturer/Operating

- 1. Traditional Pharmaceuticals
- 2. Biopharmaceuticals/Biotechnology
- 3. Contract
- 4. Generic
- 5. Veterinary Medicine
- 6. Medical Devices/Diagnostics
- 7. Bulk/API
- 8. Cosmetics
- 9. Food/Nutraceuticals

Service Provider

- 10. Engineering/Architecture
- 11. Consulting
- 12. Validation/Qualification/Commissioning
- 13. CRO – Clinical or Contract Research
- 14. Construction Services Contractor
- 15. Facilities/Equipment Maintenance
- 16. IT/Computer Services

Supplier

- 17. Equipment/Components
- 18. Packaging Materials
- 19. Clinical/Investigational Products
- 20. Software/Hardware Products
- 21. Chemicals/Intermediates

Academia

- 22. Academia

Public Authority/Government

- 23. Public Authority/Government

- 99. Other: _____

**WHAT IS YOUR PRIMARY AREA OF EXPERTISE?
(select one)**

- A. Architect/Engineer/Construction
- B. Clinical/Investigational Products
- C. Health/Safety/Environmental
- D. Information Technology
- E. Logistics/Supply Chain Management
- F. Maintenance
- G. Operations/Manufacturing
- H. Process Control/Automation
- I. Process Development/Technology Transfer
- J. Project Management
- K. Quality Assurance/Control
- L. Regulatory/Compliance
- M. Research and Development
- N. Sales/Marketing/Business Development
- O. Technical Services/Product Support
- P. Training
- Q. Validation/Qualification/Commissioning
- Z. Other: _____

YEARS IN INDUSTRY:

- 1-4
- 5-14
- 15-19
- 20 and more years



AGE RANGE

- 25 and under
- 26-35
- 36-45
- 46-55
- 56-65
- 66 and above

I hereby apply for membership in ISPE and certify that all statements made in this application are correct, and if elected to membership, agree to be governed by the Society Bylaws.

Applicant's Signature _____

Date _____

Referring Member Name _____

ID# _____

International Affiliates (select one) Network with industry and regulators in your region and attend local events with your complimentary membership in an ISPE Affiliate or Chapter. Visit www.ISPE.org/Affiliates_Chapters for more information.

- Argentina
- Australasia (or select one Chapter)
 - Brisbane
 - Melbourne
 - New Zealand
 - Sydney
- Belgium
- Brazil
- Canada: Central Canada
- Czech Republic/Slovakia
- France
- Germany/Austria/Switzerland
- India
- Ireland
- Italy
- Japan
- The Netherlands
- Nordic (Sweden, Denmark, Norway, Finland, and Iceland)
- Poland
- Singapore
- Spain
- Thailand
- Turkey

United Kingdom (check one Region)

- Central
- North East
- North West
- Scotland
- Southern

United States of America (check one Chapter)

- Boston Area (Eastern and Central Massachusetts, Maine, and New Hampshire)
- Carolina-South Atlantic (North and South Carolina, Georgia, Florida, Alabama, and Tennessee)
- Chesapeake Bay Area (Maryland; Washington, DC; and Northern Virginia)
- Delaware Valley (Eastern Pennsylvania, Southern New Jersey, and Delaware)
- Great Lakes (Ohio, Indiana, Illinois, Michigan, Wisconsin, and Kentucky)
- Greater Los Angeles (Los Angeles, Orange, Ventura, and Riverside Counties)
- Midwest (Missouri, Kansas, Nebraska, Iowa, and Minnesota)
- New England (Connecticut, Western Massachusetts, Rhode Island, Upstate New York, and Vermont)
- New Jersey (New Jersey, New York, and Northeastern Pennsylvania)
- Pacific Northwest (Washington and Oregon)
- Puerto Rico (Puerto Rico)
- Rocky Mountain (Colorado, Utah)
- San Diego (San Diego north to south Orange County)
- San Francisco Bay Area (Northern California)
- South Central (Texas, Oklahoma, and Louisiana)

I do not wish to join an Affiliate or Chapter

ISPE Headquarters

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