



USBJI Membership Application

We welcome support through your membership of the United States Bone and Joint Initiative (USBJI), the U.S. National Action Network of the worldwide Bone and Joint Decade!

Annual dues

- Participating Membership (not-for-profit organizations) \$1,000
- Associate Membership (for-profit organizations)
 - Diamond \$25,000 and over
 - Emerald \$15,000 and over
 - Ruby \$10,000 and over
 - Sapphire \$5,000 and over
 - Topaz \$2,500 and over (for small-size corporations)

Participating Member Associate Member - Level: _____

We agree to abide by the USBJI Bylaws, and understand that annual dues, payable on a calendar year basis, are due at the beginning of every year and up to such time as we inform the USBJI in writing of any desire to change the status of our membership in the organization.

(Please print the primary contact for the organization and list additional representatives on the back)

Name: _____ Title: _____

(Signature)

Organization: _____

Organization Acronym: _____ Web site: _____

Address: _____

City: _____ State: _____

Zip Code: _____ Country: _____

Phone: _____ Fax: _____

E-mail: _____

Payment information:

Amount: \$_____ Payment is enclosed. Please bill this credit card. Please bill us.

Credit Card Payment:

Visa MasterCard

Credit Card Number: _____ Name on Card: _____

Signature: _____ Expiration Date: _____

Dues are billed annually to the attention of the primary contact from every organization or corporation.

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(Please print)

Organization: _____

Additional Representatives:

(1) Name: _____ **Title:** _____

Phone: _____ E-Mail: _____

(2) Name: _____ **Title:** _____

Phone: _____ E-Mail: _____

(3) Name: _____ **Title:** _____

Phone: _____ E-Mail: _____

(4) Name: _____ **Title:** _____

Phone: _____ E-Mail: _____