



MEMBERSHIP APPLICATION

COMPANY INFORMATION:

New

Renewal

Company / Organization Name _____
Date

Address _____
Company WebSite

Address 2 / Suite

City/State/Zip _____
of Employees in Missouri / # Worldwide

Phone _____
Fax

MAIN COMPANY REPRESENTATIVE: (Responsibilities include receipt of all official correspondence, payment of membership dues, designation of company reps and updates of company information.)

Name _____
Phone _____
Fax

Title _____
Email

COMPANY CONTACTS: (All contacts below must be completed before application can be approved.)

CEO/President _____
Email _____
Phone

CTO/CSO _____
Email _____
Phone

Business Development _____
Email _____
Phone

Government Affairs Director _____
Email _____
Phone

Other _____
Email _____
Phone

INDUSTRY SEGMENT AND MARKET FOCUS: (Please choose primary industry segment.)

MARKET FOCUS

- Biopharmaceutical
- Industrial Biotechnology
- Agricultural Biotechnology
- Diagnostics
- Medical Device
- Animal Bioscience
- Drug Discovery
- Therapeutics
- Renewable Fuels

RESEARCH / PROFESSIONAL ADVISORS / FINANCE/SERVICES – MARKET FOCUS

- Academic/Research
- CRO
- Gen. Contractor/Bio Construction
- Diagnostics
- Hospital/Health Care
- Internet/Software
- Marketing/Communications
- Real Estate
- Venture Capital
- Accounting
- BioInformatics
- Economic Development
- Finance
- Insurance
- Legal/Intellectual Property
- Non-Profit/Life Sciences Support
- Recruitment
- Other {Please Specify} _____

MEMBERSHIP CATEGORIES

Life Science Industry Membership Type / Annual Dues (Check One)

- 200+ employees (profitable)..... \$ 10,000
- 200+ employees (not yet profitable).. \$ 5,000
- 101 - 199 employees..... \$ 2,500
- 51 - 100 employees.....\$ 1,000
- 26 - 50+ employees..... \$ 750
- 16 - 25+ employees..... \$ 500
- Less than 15 employees \$ 250

Associate Memberships have a suggested minimum amount of \$ 500

Corporate Sponsorships (Check One)

- Premium Key Stakeholder Investor....\$ 25,000
- Diamond Investor.....\$ 10,000
- Gold Investor.....\$ 5,000
- Silver Investor..... \$ 2,500
- Bronze Investor.....\$ 1,000

PAYMENT

Make checks payable to Missouri Biotechnology Association. Dues are valid for one year, and recur on a calendar year basis from January through December. The Federal Tax ID # for MOBIO is 43-1908699

Dues Amount \$ _____ Check Enclosed

Credit Card Payment: VISA MasterCard

Credit Card # _____

Exp. Date: _____ / _____

Name on Credit Card: _____

Signature: _____

Please complete form and mail or fax to Mr. Kelly Gillespie, Executive Director, Missouri Biotechnology Association, PO Box 148, 428 East Capitol Avenue, Jefferson City, MO 65102-0148
Phone: (573) 761-7600 Fax: (573) 761-7601