



2008 Application for Membership to CPIA

Mail/Fax Completed form to: **CPIA**
 Phone: 303-592-4064
 E-mail: cpia@coloradophotonics.org

1625 Broadway, Suite 950 Denver, CO 80202
 FAX: 303-592-4061
www.coloradophotonics.org

CPIA MEMBERSHIP APPLICATION

Member/Organization: _____

Mailing Address: _____

City: _____ St _____ ZIP: _____

Phone: _____ Fax: _____

Contacts:

Position	Name	Email address
Primary Contact		
CEO		
CTO		
CFO		
Dir. Engineering		
Dir. Sales		
Dir. Operations		
Human Resources		
Communications/PR		

Product/Services Description (50 word limit for CPIA website)

Your Website URL

INDUSTRY MEMBERS (based on FTE)	OTHER SUPPORTERS
<input type="checkbox"/> \$175.00 – Lone Eagle Member [1-2 person]	<input type="checkbox"/> \$600.00 – Associate Member
<input type="checkbox"/> \$275.00 – Industry Member [3 to 9]	[Professional / Service]
<input type="checkbox"/> \$400.00 – Industry Member [10 to 24]	<input type="checkbox"/> \$400.00 – Institutional Member
<input type="checkbox"/> \$525.00 – Industry Member [25 to 49]	[Government, Academic, Nonprofit]
<input type="checkbox"/> \$600.00 – Industry Member [50 to 99]	<input type="checkbox"/> \$110.00 – Individual Member
<input type="checkbox"/> \$650.00 – Industry Member [100 to 249]	_____
<input type="checkbox"/> \$700.00 – Industry Member [250+]	<input type="checkbox"/> Contact me about sponsorships

Enclosed is a check payable to CPIA Please invoice me Contact me to pay by credit card

Signature: _____ Date: _____