

PRIME Alliance AIBSL
 Avenue Louise 367
 1050 Brussels (Belgium)
 Register of Legal Entities Brussels
 0843.491.214
 (the "Association")

APPLICATION FORM FOR MEMBERSHIP

Please complete all sections of this application form and sign and return it to our Legal and Membership Administration address: Attn. PRIME Alliance, c/o Ianusgroup Sprl, Avenue Marnix 30, 1000 Brussels, Belgium and by e-mail to the following e-mail address: help@prime-alliance.org. The President or Secretary may request additional information to assess an application. The admission as a Principal or Regular Member to the Association requires a decision of the Board of Directors, which shall be taken at the first meeting of the Board of Directors following the application for membership. Admission shall only become effective after execution of the Participation Agreement and payment of the annual membership fee. The candidate will be kept informed of the following steps in the procedure after submission of this application form.

The Undersigned:

<i>Name of the entity:</i>	
<i>Nature of the entity¹:</i>	
<i>Registered office of the entity:</i>	
<i>Registration place and number of the entity (e.g. trade register number):</i>	
<i>Website of the entity</i>	
<i>Short description of the entity and its activities²</i>	Number of employees: Turnover: Main activities:
<i>Category: Utility, Meter/Device Manufacturer, Silicon Provider, Other (please state)</i>	
<i>Where did you hear about PRIME Alliance?</i>	

¹ Profit or non-profit entity, governmental organisation or educational institution.

² non compulsory; may be provided later.

<i>i.e. website, tradeshow, conference, newsletter</i>	
<i>Primary contact person for general matters in relation to the Association³:</i>	First name: Last name: Job title: Street: City: Postal Code: Country: Phone: Fax: Email address:
<i>Secondary contact person for general matters in relation to the Association⁴:</i>	First name: Last name: Job title: Street: City: Postal Code: Country: Phone: Fax: Email address:
<i>Marketing / PR contact person⁵:</i>	First name: Last name: Job title: Street: City: Postal Code: Country: Phone: Fax: Email address:
<i>Technical contact person⁶:</i>	First name: Last name: Job title: Street: City: Postal Code: Country: Phone: Fax: Email address:
<i>Billing contact details if other than the primary contact details</i>	Company: Street: City: Postal Code: Country:
<i>Name and title of the person who will represent the entity in the General Meeting of the Association:</i>	

³ E.g. for sending the convocation letter for the General Meeting.

⁴ non compulsory; may be provided later.

⁵ non compulsory; may be provided later.

⁶ non compulsory; may be provided later.

Hereby declares to have read the Articles of Association and IPR Policy of PRIME Alliance AISBL, to apply for admission as, and undertakes to pay the annual membership fee for this year as indicated below⁷:

A. Principal Member

6.000 EUR

B. Regular Member

5.000 EUR

* *
*

For the Undersigned,

Place and date

Name:	Name:
Capacity:	Capacity:

If you would have any questions regarding this application form or you would like to receive a copy of the Articles of Association and/or IPR Policy of PRIME Alliance AISBL, please contact the secretariat by e-mail at help@prime-alliance.org.

⁷ Please mark your choice.