COMPANY/ORGANIZATION INFORMATION





Biomarkers Consortium Membership Application

Company/Organization Nar	me:							
Division:								
PRIMARY CONTACT INFORM	MATION							
Name:			Title:					
Street:			City:				Zip:	
E-mail:			Tel:			_		
Authorized By:			Title:					
Signature:			Date:					
			Dute.					
ENTERDRICE MEMBERCHIR								
ENTERPRISE MEMBERSHIP Size of R&D budget Annual Membership			84-	uahauahin fau 7	Thurs Vesus	100/ 8458	ADEDCIND DICCOUNT	
Size of R&D budget	Annual IVI	<u>-</u>	Membership for Three Years		_	10% MEMBERSHIP DISCOUNT		
\$3 billion+ \$1-3 billion		\$150,000			\$405,000			
<u> </u>		\$100,000		\$135,000		an un-fro	an up-front 10% discount on membership dues paid in full.	
\$100 million - \$1 billion		\$50,000				_ members		
Under \$100 million		\$10,000			\$27,000	_		
Non-profits		\$5,000			\$13,500	<u>'</u>		
PER-COMMITTEE MEMBER	SHIP							
Size of R&D budget	Annual Price Per (Committee	Steering Committees		;	Total		
\$3 billion+		\$40,000			Cancer \square	\$		
\$1-3 billion		\$28,000	Inflamation & Immunity 🗌					
\$100 million - \$1 billion	\$15,000			Metabolic Disorders]		
				Neuro	science [
For more information, or to	return this complete	ed form, plea	ase conta	ct:				
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(301) 435-4493	(301) 443-1744		(301)	443-2103 (30		(301) 402-602	301) 402-6027	
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