

2024 APPLICATION

ABOUT YOUR MEMBERSHIP

Corporate membership is available to industry-oriented organizations which are defined as for-profit and nonprofit entities that are engaged in the lifecycle or supply chain for medical devices and health technology, consult on medical devices and health technology, or otherwise provide products and services relevant to AAMI's mission.

COMPLETE CORPORATE ADDRESS INFORMATION

Please type or print your organization's name as it should appear in the AAMI database:

Parent/Main Company Name: _____

Mailing Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Main Phone: _____

Website Address: _____

DESIGNATE A PRIMARY REPRESENTATIVE

Please name a Primary Corporate Representative who will serve as the point of contact on the membership:

Primary Corporate Rep: _____

Title: _____

E-mail: _____

Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Phone: _____

CORPORATE DUES WORKSHEET

Please complete Worksheet Parts A and B of this application on pages three and four.

CHOOSE PAYMENT METHOD

Membership Dues:* \$ _____

Your membership dues cover a 365 day period.

(Calculate on Worksheet Part B on page. four)

Check is enclosed made payable to AAMI. (*Checks must be in U.S. funds drawn on a U.S. bank.*)

Invoice Me

Charge this to: VISA MasterCard AMEX

Card Number: _____

Expiration Date: _____

Cardholder Signature: _____


Cardholder Name: _____


CVV or CVC Code (3- or 4-digit code) : _____

If billing address is different from mailing address, please add it here:


* For U.S. citizens only: Membership dues to AAMI are not deductible as a charitable contribution for U.S. federal income tax purposes, but may be deductible as a business expense.

SUBMIT YOUR APPLICATION FORM

 **CALL** 1-800-332-2264 (or 1-703-525-4890 outside the U.S.), to charge your payment by phone.

 **MAIL** this form along with your check or credit card information to: AAMI, 901 N. Glebe Road, Suite 300, Arlington, VA 22203.

 **FAX** this form with credit card information to 703-783-0705.

 **EMAIL** this form with credit card information to membership@aami.org.

THANK YOU!



ABOUT YOUR MEMBERSHIP

Visit www.aami.org for a comprehensive list of member benefits.

MEMBERSHIP BENEFITS INCLUDE:

- Leadership positions on standards committees, TAGs, and non-standards committees
- Deep discounts on the purchase of AAMI products and event registrations
- Online access to *AAMINews* and *BI&T*.
- Annual vote for AAMI Board of Directors and bylaws changes
- Access to AAMI Connect online discussion groups
- Discounted exhibit booth space at the AAMI Exchange
- Member discounts off job postings in the AAMI Career Center

COMPANY DEMOGRAPHICS

PLEASE SELECT YOUR COMPANY'S PRODUCT AREA(S):

Check all that apply.

- | | | |
|--|--|---|
| <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Health Information Technology/ IT | <input type="checkbox"/> Ophthalmic |
| <input type="checkbox"/> Artificial Intelligence | <input type="checkbox"/> Home Healthcare | <input type="checkbox"/> Orthopedics |
| <input type="checkbox"/> Biocompatibility | <input type="checkbox"/> Human Factors/Usability | <input type="checkbox"/> Packaging |
| <input type="checkbox"/> Biologics | <input type="checkbox"/> Infusion | <input type="checkbox"/> Pharmaceuticals |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> In Vitro Diagnostics | <input type="checkbox"/> Protective Barriers |
| <input type="checkbox"/> Combination Products | <input type="checkbox"/> Imaging | <input type="checkbox"/> Radiology |
| <input type="checkbox"/> Cybersecurity | <input type="checkbox"/> Materials | <input type="checkbox"/> Robotics |
| <input type="checkbox"/> Dental | <input type="checkbox"/> Nanotechnology | <input type="checkbox"/> Software |
| <input type="checkbox"/> Dialysis | <input type="checkbox"/> Neurology | <input type="checkbox"/> Sterilization |
| <input type="checkbox"/> ENT | <input type="checkbox"/> ObGyn | <input type="checkbox"/> Wearable Technology |
| <input type="checkbox"/> Gastroenterology | | <input type="checkbox"/> Other (please specify) _____ |

GET INVOLVED IN AAMI STANDARDS

AAMI members have the unique opportunity to make a difference. By participating on AAMI standards committees, you can have a direct role in shaping medical device standards, and work side by side with industry colleagues and participating government agencies (e.g., FDA). Standards, technical information reports, and recommended practices represent a national consensus.

Each company, including all subsidiaries, may have one primary (voting) member, one alternate, and up to six liaisons per standards committee. Additional liaisons can be approved upon special request.

To join an AAMI standards committee or working group, visit www.aami.org/standards, email standards@aami.org, or call 703-525-4890.

COMPLETE SUBSIDIARY INFORMATION

Please list all subsidiaries that have medical sales in your calculation of corporate dues on Worksheet Part B on page four. (Use a separate sheet of paper if necessary).

Subsidiary Company Name: _____

Mailing Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Main Phone: _____

Website Address: _____

Subsidiary Company Name: _____

Mailing Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Main Phone: _____

Website Address: _____

Subsidiary Company Name: _____

Mailing Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Main Phone: _____

Website Address: _____

Subsidiary Company Name: _____

Mailing Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Main Phone: _____

Website Address: _____



CORPORATE MEMBERSHIP WORKSHEET PART B

COMPANY NAME: _____

IMPORTANT CONFIDENTIALITY NOTICE

AAMI requests that industry-oriented organizations (see definition on page one) report gross worldwide medical device and health technology sales emanating from the parent company and all subsidiaries in the computation of annual dues. **AAMI requests that the incoming dues payment be supported by completing this worksheet using sales data from the most recently completed fiscal year.** Sales data is utilized only for dues collection purposes and is kept completely confidential. For questions regarding this request, contact the AAMI membership department at 1-800-332-2264, or email membership@aami.org.

CALCULATE 2024 DUES PAYMENT:

STEP 1: Enter gross worldwide medical device and health technology sales emanating from the parent company and all subsidiaries in the computation of annual dues from the most recently completed fiscal year, including biologics, device, pharmaceutical, and software, and any consulting sales and/or services to the device, hospital, and health care industry.

\$ _____, _____, _____, _____

STEP 2: Refer to the schedule below and complete the dues formula: *(Round to the nearest dollar)*

\$ _____ + [_____ x (\$ _____ - \$ _____)] = _____

(enter Base Dues Amt.) (enter Multiplier) (Gross Sales minus Base Sales Amt. for your tier) (Dues Amt.)

EXAMPLE: Based on gross worldwide sales of \$65,000,000. Enter \$37,705 for tier five as the base dues amount. Take the multiplier amount (0.00954810%) and multiply it by the difference between the gross worldwide sales (\$65,000,000) and the base sales amount for tier five (\$50,000,000). Now add that to the base dues amount of \$37,705 to arrive at total dues owed of \$39,137.

FORMULA: \$37,705 + [0.0095481% x (\$65,000,000 – \$50,000,000)] = \$39,137

ADDITIONAL REPRESENTATIVES: Add _____ Representatives @ \$185 each for a total of \$ _____ + dues payment \$ _____ = \$ _____

MEMBERSHIP TIER	GROSS WORLDWIDE SALES	BASE DUES AMT.	MULTIPLIER	NUMBER OF CORPORATE REPRESENTATIVES
NEW COMPANY	\$0 up to \$400,000 and in existence for three years or less	\$545		5
SMALL COMPANY	Less than \$400,000 per year	\$820		5
TIER 1	\$400,000 – \$1,999,999	\$960	0.20157100%	10
TIER 2	\$2,000,000 – \$4,999,999	\$5,400	0.19626650%	16
TIER 3	\$5,000,000 – \$24,999,999	\$13,510	0.07426300%	21
TIER 4	\$25,000,000 – \$49,999,999	\$29,260	0.03182700%	27
TIER 5	\$50,000,000 – \$99,999,999	\$37,705	0.00954810%	30
TIER 6	\$100,000,000 – \$499,999,999	\$42,770	0.00212180%	35
TIER 7	\$500,000,000 – \$999,999,999	\$51,775	0.00187779%	39
TIER 8	\$1,000,000,000 – \$2,499,999,999	\$61,905	0.00047741%	46
TIER 9	\$2,500,000,000 – \$4,999,999,999	\$69,785	0.00032888%	51
TIER 10	\$5,000,000,000 – \$9,999,999,999	\$81,035	0.00028538%	Unlimited
TIER 11	\$10,000,000,000 – \$100,000,000,000	\$99,045	0.00028432%	Unlimited