

CORPORATE MEMBERSHIP

2023 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:	
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

Your membership dues cover a 365 day period.

Membership Dues:*

(Calculate on Worksheet Part B on pg. 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) :					
* For U.S. citizens only: Membership dues to AAMI are not deductible as a					

SUBMIT YOUR APPLICATION FORM

deductible as a business expense.

CALL 1-800-332-2264, ext. 1214 (or 1-703-525-4890, ext. 1214 outside the U.S.), to charge your payment by phone.

charitable contribution for U.S. federal income tax purposes, but may be

- 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.

☐ Anesthesia	☐ General Surgery	□ Orthopedics
☐ Artificial Intelligence	☐ Health Information	□ Packaging
☐ Biocompatibility	Technology/ IT	□ Pharmaceuticals
☐ Biologics	☐ Home Healthcare	□ Physical Medicine
☐ Cardiovascular	☐ Human Factors/Usability	□ Protective Barriers
☐ Combination Products	☐ Infusion	□ Radiology
☐ Cybersecurity	□ Imaging	□ Robotics
□ Dental	☐ Materials	□ Software
□ Dialysis	□ Nanotechnology	□ Sterilization
□ ENT	□ Neurology	☐ Tissue Engineering
☐ Gastroenterology	□ ObGyn	☐ Wearable Technology
☐ General Hospital	☐ Ophthalmic	☐ 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, ext. 1250.

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:		
Subsidiary Company Name:		
Mailing Address:		
	State/Province:	
Zip/Postal Code:	Country:	
	·	
Subsidiary Company Name:		
	State/Province:	
Zip/Postal Code:	Country:	
Main Phone:		
Subsidiary Company Name:		
	State/Province:	
	Country:	
	· 	
Website Address:		

CORPORATE MEMBERSHIP WORKSHEET PART B

COMPANY N	AME: _	

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, x1214 or email membership@aami.org.

CALCU	LATE 202	3 DUES PAY	MENT:		
the computation	on of annual dues fr	om the most recently com		om the parent company and all iologics, device, pharmaceutical	
\$,					
STEP 2: Refer	to the schedule belo	w and complete the dues fo	ormula: (Round to the neares	t dollar)	
\$	+ [x (\$) =	
(enter Base Du	ues Amt.) (enter N	Iultiplier) (Gross Sales r	minus Base Sales Amt. for yo	our tier) (Dues Amt.)	
amount (0.009	927%) and multiply	it by the difference betwee		as the base dues amount. Take t (\$65,000,000) and the base sal tal dues owed of \$37,996.	
FORMULA: \$	36.605 + [0.00927	% x (\$65.000.000 – \$50.0	000.000)] = \$37.996		

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		\$530		5	
SMALL COMPANY	Less than \$400,000 per year		\$795		5	
TIER 1	\$400,000	_	\$1,999,999	\$930	0.1957%	10
TIER 2	\$2,000,000	_	\$4,999,999	\$5,245	0.19055%	16
TIER 3	\$5,000,000	_	\$24,999,999	\$13,115	0.0721%	21
TIER 4	\$25,000,000	_	\$49,999,999	\$28,410	0.0309%	27
TIER 5	\$50,000,000	_	\$99,999,999	\$36,605	0.00927%	30
TIER 6	\$100,000,000	_	\$499,999,999	\$41,525	0.00206%	35
TIER 7	\$500,000,000	_	\$999,999,999	\$50,265	0.0018231%	39
TIER 8	\$1,000,000,000	_	\$2,499,999,999	\$60,100	0.0004635%	46
TIER 9	\$2,500,000,000	_	\$4,999,999,999	\$67,750	0.0003193%	51
TIER 10	\$5,000,000,000	_	\$9,999,999,999	\$78,675	0.000277%	Unlimited
TIER 11	\$10,000,000,000	_	\$100,000,000,000	\$96,160	0.000276%	Unlimited