



LEAP / CSCIP MEMBERSHIP APPLICATION



LEAP membership is an annual subscription that is open to all individual professionals working in the smart card industry in the US and worldwide, regardless of whether their organization is a current member of the Smart Card Alliance. LEAP membership fees are billed in advance for one full year, than billed on a prorated basis for the remainder of the calendar year in the second year so that all LEAP memberships will renew again in January of the second year and in each year thereafter.

Certified Smart Card Industry Professional (CSCIP) designation is an option for LEAP members, but not a requirement for LEAP participation. Only complete the CSCIP Membership section on this form if you wish to apply for acceptance into the CSCIP training and certification program. CSCIP applicants who complete their CSCIP certification must maintain their LEAP membership for their CSCIP certification status to remain valid.

PERSONAL INFORMATION

Name:	Title:
Company:	
<input type="checkbox"/> SCA member company	<input type="checkbox"/> Non-SCA member
Company address:	
City/State/Zip:	
Phone:	Email:
Number of years with company:	Company website:
Alternate email or phone number (in case company information changes)	

LEAP MEMBERSHIP

Smart Card Alliance Members (All Membership levels) - \$200 Annual LEAP Membership Fee

- GENERAL Members Only:** A one-time complimentary LEAP membership is offered to Smart Card Alliance General Member companies in good standing for the first year of LEAP membership. (Additional LEAP members may join at the Smart Card Alliance member rate of \$200)

I acknowledge that this complimentary LEAP membership application has been approved by our designated Smart Card Alliance member point of contact/representative:

- LEADERSHIP COUNCIL Members Only:** Up to three (3) one-time complimentary LEAP memberships are offered to Smart Card Alliance Leadership Council Member companies in good standing for the first year of LEAP membership. (Additional LEAP members may join at the Smart Card Alliance member rate of \$200.)

I acknowledge that this complimentary LEAP membership application has been approved by our designated Smart Card Alliance member point of contact/representative:

Non-Smart Card Alliance Members - \$300 Annual LEAP Membership Fee

CSCIP MEMBERSHIP

LEAP members with a minimum of 2 years professional experience in the smart card industry are eligible to advance their professional development in the smart card industry by applying for CSCIP certification. Applicants must submit a description of the professional experience in the smart card industry AND provide two (2) professional references familiar with their work history.

- Certified Smart Card Industry Professional (CSCIP) application fee: \$50.00
- I DO NOT wish to apply for CSCIP certification program acceptance at this time (skip this section on the form)

Total number of years of smart card industry-related experience:
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Most recent past Smart Card Industry employer (if less than two years at current employer)

Company:	Website:
Position(s) held:	Number of years with company:

Please summarize your smart card industry experience (a minimum of two years experience in a smart card-related field is required). Please limit your response to 100 words or attach separate sheet.

List two personal professional references who can verify your smart card industry experience:

1. Name:	Title:
Company:	
Address:	
City/State/Zip:	Phone:
Email:	

2. Name:	Title:
Company:	
Address:	
City/State/Zip:	Phone:
Email:	

Note: If you cannot meet all of the above requirements, you may submit a letter or email documenting why you feel you are qualified for the CSCIP program, for review by the Smart Card Alliance.

I have read the LEAP/CSCIP terms and conditions manual and understand the requirements for the program

LEAP / CSCIP APPLICATION PAYMENT INFORMATION

Enter total amount to be paid by check, wire transfer or charged to the credit card below: \$_____
Payment by:

- Check (Please note "LEAP/CSCIP" on the memo line of the check, which must be in US currency only.
 Payable to: Smart Card Alliance, 191 Clarksville Road, Princeton Junction, NJ 08550)
- Wire Transfer: Bank of America 3745 Quakerbridge Road Mercerville, NJ USA 08619
 1- 609-586-8200; International SWIFT # BOFAUS3N, SCA Bank Account # 381 018 973 631
- Credit card: Visa, MasterCard, American Express or Discover Card are accepted.

Name on Card: _____

Billing Address: _____

Credit Card Account No: _____

Expiration Date: _____ Security Code: _____

Email completed form to LEAPinfo@smartcardalliance.org

Or fax completed form to: 1-609-897-0262

For questions, call 1-800-556-6828 or email us at LEAPinfo@smartcardalliance.org

