



## Membership Application

This will serve as a letter of intent of the organization listed below and hereinafter referred to as Prospective Member, to join the Secure Technology Alliance, a not-for-profit multi-industry member organization, with rights, privileges and responsibilities detailed in the bylaws of the Secure Technology Alliance. All items marked with asterisk (\*) are required.

### Organization Details

Organization Name\* \_\_\_\_\_ Website\* \_\_\_\_\_

Address\* \_\_\_\_\_

Street Address Line 1\* \_\_\_\_\_

Street Address Line 2 \_\_\_\_\_

City\* \_\_\_\_\_ State/Province\* \_\_\_\_\_

Zip/Postal Code\* \_\_\_\_\_ Country\* \_\_\_\_\_

**Please attach logo (Max file size 520MB - .jpg .gif .png .pdf)**

**Provide Short Description of Company \* (Or attach separate file)**

Permission to include Company name on membership lists for general marketing purposes.\*

- Yes
- No

Permission to provide link from Secure Technology Alliance site to your organization's website. \*

- Yes
- No

Member qualifications and benefits vary by membership level as described at [Membership Information : Membership Levels – Secure Technology Alliance \(securetechalliance.org\)](https://securetechalliance.org). Membership dues are based on member's annual revenue. Annual Revenue\* \_\_\_\_\_

**Select desired Membership Level and Dues Tier based on annual revenue. Select only one.**

#### Leadership (revenue = dues)

- <\$100 Million = \$14,000
- \$100 Million-\$1 Billion = \$18,000
- >\$1 Billion = \$20,000
- Global Payment Networks = \$30,000

#### Principal (revenue = dues)

- Start-up (<2 yrs.) = \$4,000
- Merchants = \$14,000
- \$10-\$50 Million = \$10,000
- \$50-\$100 Million = \$12,000

- <\$5 Million = \$6,000
- \$5-\$10 Million = \$8,000

- \$100-\$500 Million = \$14,000
- >\$500 Million = \$16,000

**General (revenue = dues)**

- Start-up (<2 yrs.) = \$1,200
- Merchants = \$6,000
- <\$5 Million = \$3,000
- \$5-\$10 Million = \$4,000

- \$10-\$50 Million = \$5,000
- \$50-\$100 Million = \$6,000
- \$100-\$500 Million = \$7,000
- >\$500 Million = \$8,000

**Associate**

- All government agencies, colleges & universities, and industry associations = \$2100

**Individual**

- Student = \$50
- Retiree = \$600
- Individual = \$1,200

The prospective member intends to join the Secure Technology Alliance at the membership level indicated above and agrees to pay the annual dues. Payment terms are 30 days from the date of submitting this application. The Secure Technology Alliance membership year runs for one year starting with the first day of the month joined and renews automatically on the anniversary date unless prior notice of cancellation is provided in writing. The Secure Technology Alliance does not lobby, and no allocation of dues is necessary for tax purposes.\*

I acknowledge that I have read the Secure Technology Alliance bylaws at [Membership Information : Bylaws and Policies – Secure Technology Alliance \(securitechalliance.org\)](http://securitechalliance.org), agree to comply with the bylaws and policies established by the Board, pay the annual dues until notifying the Alliance of non-renewal in writing, meet the qualifications for the membership level selected, and agree to the Terms and Conditions of the Secure Technology Alliance.\*

**Industry Classification (Select all that apply)**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Acquirer                           | <input type="checkbox"/> Industry Association | <input type="checkbox"/> Domestic Debit Network            |
| <input type="checkbox"/> Bank                               | <input type="checkbox"/> Industry Supplier    | <input type="checkbox"/> Service Provider                  |
| <input type="checkbox"/> Consultant                         | <input type="checkbox"/> Integrator           | <input type="checkbox"/> Software Products                 |
| <input type="checkbox"/> Cryptocurrency                     | <input type="checkbox"/> ISO                  | <input type="checkbox"/> Student / Retiree                 |
| <input type="checkbox"/> Distributor                        | <input type="checkbox"/> Issuer               | <input type="checkbox"/> Systems Manufacturer (HW &/or SW) |
| <input type="checkbox"/> End User                           | <input type="checkbox"/> ISV                  | <input type="checkbox"/> University (or College)           |
| <input type="checkbox"/> Gateway                            | <input type="checkbox"/> Merchant             | <input type="checkbox"/> ATM Network                       |
|   | <input type="checkbox"/> Mobile Payments      |  |
| <input type="checkbox"/> Global Payment Network             | <input type="checkbox"/> Other Fintech        | <input type="checkbox"/> Other                             |
| <input type="checkbox"/> Government (Federal, State, Local) | <input type="checkbox"/> Processor            |  |

List other industry classification:

**Products Offered (Select all that apply)**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> ATM           | <input type="checkbox"/> NFC (cards or devices) | <input type="checkbox"/> Software      |
| <input type="checkbox"/> Biometrics    | <input type="checkbox"/> Payments               | <input type="checkbox"/> Terminals     |
| <input type="checkbox"/> Card Issuance | <input type="checkbox"/> Payments Applications  | <input type="checkbox"/> Other Devices |

- Cards
- Credential Issuance
- Encryption
- Integration Services
- IoT
- Readers
- Secure Chip
- Services
- Smart Cards

List other device types:

Other  
List other:

**Markets Served (Select all that apply)**

- Corporate
- Education
- Financial
- Government
- Government agencies:
- Healthcare
- Identity/Access
- Insurance
- IoT
- Manufacturing

Merchants/Retail  
 Transportation  
 Utilities  
 Other  
List other:

**Payment Details**

Upon approval of the application, the Alliance will send the new member an electronic invoice. Payment may be made by credit card, wire transfer, or check. Instructions for each payment method will be included with the electronic invoice.

**Member Primary Point of Contact**

First Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_  
 Title\* \_\_\_\_\_ Email address\* \_\_\_\_\_  
 Work phone\* \_\_\_\_\_ Mobile phone \_\_\_\_\_  
 Fax \_\_\_\_\_

**Alternate Point of Contact**

First Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_  
 Title\* \_\_\_\_\_ Email address\* \_\_\_\_\_  
 Work phone\* \_\_\_\_\_ Mobile phone \_\_\_\_\_  
 Fax \_\_\_\_\_

**Please list the referring Secure Technology Alliance member that led you to join, if applicable**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Company \_\_\_\_\_

If you have any questions or issues while filling out the form, please email Deb Ferril: [dferril@securetechalliance.org](mailto:dferril@securetechalliance.org) or download the application and email to Deb Ferril. (Link to Download PDF)