•www.srainternational.org/privacy





Full Membership Application

| Prefix | First Name | Last Nam | ne | | |
|----------------------------|---|--|---------------|--------------------|----------------------|
| TitleOrganization | | | | | |
| Organizatio | n Type: | | | | |
| □ College 8 | & University (choose if app | olicable: 🗆 PUI 🗆 HBCU 🗆 P | rimarily Hisp | anic Institution 🗆 | Tribal College) |
| □ Hospital | s/Medical Centers 🛛 Re | esearch Institute 🗆 Governme | ent 🗆 Non | -Profit 🗆 Comme | rcial |
| Primary Ma | iling Address | | | | |
| City/ Provin | ice | State | Zip | Country | _ |
| E-mailPhone | | | | | |
| | | | | | |
| New Full | Membership | | | | □ \$ 235.00 * |
| Full membe transferable | • | fits SRAI has to offer. Full memb | ership belon | gs to the member a | nd is not |
| DONATE | TO SRAI (SRAI is a non-pr | ofit tax deductible 501(c)3) | | | |
| | | | | TOTAL | |
| CHECK PAY | MENT INFORMATION | | | | |
| | nt must accompany your m . Mail your completed app | embership application. Checks lication with check to: | MUST includ | e member name an | d completed |
| | | | | | |

SRAI

New Address 1530 Wilson Boulevard, Suite 650 Arlington, VA 22209

Membership fees are non-refundable. *Rate includes a one-time \$30.00 processing fee.

SRAI Code of Ethics and Statement of Expectations for Professional Conduct of Members

By becoming a member of SRAI you agree to SRAI's Code of Ethics and SRAI's Statement of Expectations for Professional Conduct of Members, which can be found at www.srainternational.org/about/who-we-are.