



# MEMBERSHIP APPLICATION

Type of Membership

Individual (\$85/yr)
  Corporate, up to 5 members (\$500/yr)
  Corporate, up to 10 members (\$750/yr)

Company

Address

City	State	Zip	Country
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Business Type

Manufacturer
  Supplier/Distributor
  Educational/Research
  Government
  Other:

Individual Member or First Member of Corporate Membership

First Name	Last Name	Job Title
Email Address	Telephone	Fax

Additional Corporate Members

2. First Name	Last Name	Job Title
Email Address	Telephone	Fax

3. First Name	Last Name	Job Title
Email Address	Telephone	Fax

4. First Name	Last Name	Job Title
Email Address	Telephone	Fax

5. First Name	Last Name	Job Title
Email Address	Telephone	Fax

For Corporate memberships with 6-10 members, please continue on the next page.

Make check payable to SEMA in US dollars. Mail to SEMA, 3617 West MacArthur, Suite 507, Santa Ana, CA 92704 USA.



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## Additional Corporate Members

6. First Name	Last Name	Job Title
Email Address	Telephone	Fax
7. First Name	Last Name	Job Title
Email Address	Telephone	Fax
8. First Name	Last Name	Job Title
Email Address	Telephone	Fax
9. First Name	Last Name	Job Title
Email Address	Telephone	Fax
10. First Name	Last Name	Job Title
Email Address	Telephone	Fax

Make check payable to SEMA in US dollars. Mail to SEMA, 3617 West MacArthur, Suite 507, Santa Ana, CA 92704 USA.

Questions or concerns? Contact [membership\\_chair@solar-ema.org](mailto:membership_chair@solar-ema.org).

More information about SEMA membership can be found on the SEMA website: [www.solar-ema.org](http://www.solar-ema.org).