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## LONMARK International Membership Application



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To better serve our members, LONMARK International posts a member and certified product directory at [www.lonmark.org](http://www.lonmark.org). As an active member, we encourage you to gain the benefit of membership by providing the following information. Periodically, we may promote your organization as part of our member marketing objectives. By completing this information you can help us to help you become more successful. In the event the Primary Contact cannot be reached, please provide an Alternate Contact. (TYPE OR PRINT)

Company Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Company Web Address: \_\_\_\_\_

### *Sponsors, Partners, Associates only*

**Alternate Contact:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Marketing Contact:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Information gathered in this section will be used to ensure that the applicant appears in the appropriate listings on the LONMARK International web site.

Please indicate the type of organization that best describes the applicant:

- |  |   |
|--|---|
| <input type="checkbox"/> Manufacturer                          | <input type="checkbox"/> Distributor                            |
| <input type="checkbox"/> End-User                              | <input type="checkbox"/> Educational Institution                |
| <input type="checkbox"/> Systems/Network Integrator            | <input type="checkbox"/> Research Institution                   |
| <input type="checkbox"/> LONWORKS® Independent Developer (LID) | <input type="checkbox"/> Government Agency                      |
| <input type="checkbox"/> Consultant                            | <input type="checkbox"/> Consulting & Specifying Engineer (CSE) |
| <input type="checkbox"/> Individual                            | <input type="checkbox"/> Other (please specify): _____          |

Please indicate the size of your company:

- |   |  |
|---|--|
| <input type="checkbox"/> 1-10 employees   | <input type="checkbox"/> 101-250 employees |
| <input type="checkbox"/> 11-25 employees  | <input type="checkbox"/> 251-500 employees |
| <input type="checkbox"/> 26-100 employees | <input type="checkbox"/> 500+ employees    |

Please indicate the Industry Market(s) served:

- |   |   |
|---|---|
| <input type="checkbox"/> Buildings          | <input type="checkbox"/> Home           |
| <input type="checkbox"/> Industrial         | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Telecommunications | <input type="checkbox"/> Utilities      |

Please indicate the Geographic Market(s) served:

- |   |  |
|---|--|
| <input type="checkbox"/> North America  | <input type="checkbox"/> Europe        |
| <input type="checkbox"/> Asia / Pacific | <input type="checkbox"/> South America |
| <input type="checkbox"/> Worldwide      |  |

Please indicate the Application Area(s) served:

- |   |  |
|---|--|
| <input type="checkbox"/> Access Control             | <input type="checkbox"/> Alarm               |
| <input type="checkbox"/> Audio/Video                | <input type="checkbox"/> Automotive          |
| <input type="checkbox"/> Avionics                   | <input type="checkbox"/> Cable/Television    |
| <input type="checkbox"/> CCTV                       | <input type="checkbox"/> Co-generation       |
| <input type="checkbox"/> Elevator                   | <input type="checkbox"/> Emergency Lighting  |
| <input type="checkbox"/> Energy Management          | <input type="checkbox"/> Field Bus           |
| <input type="checkbox"/> Fire Suppression/Detection | <input type="checkbox"/> Fluid Handling      |
| <input type="checkbox"/> HVAC                       | <input type="checkbox"/> Industrial Discrete |
| <input type="checkbox"/> Industrial Hybrid          | <input type="checkbox"/> Industrial Process  |
| <input type="checkbox"/> Lighting                   | <input type="checkbox"/> Manufacturing       |
| <input type="checkbox"/> Marine                     | <input type="checkbox"/> Materials Handling  |
| <input type="checkbox"/> Monitoring                 | <input type="checkbox"/> Pharmaceuticals     |
| <input type="checkbox"/> Power Distribution         | <input type="checkbox"/> Pulp & Paper        |
| <input type="checkbox"/> Rail/Train                 | <input type="checkbox"/> Refrigeration       |
| <input type="checkbox"/> Remote Metering            | <input type="checkbox"/> SCADA               |
| <input type="checkbox"/> Security                   | <input type="checkbox"/> Semiconductor       |
| <input type="checkbox"/> Sub-station Automation     | <input type="checkbox"/> Supervisory         |
| <input type="checkbox"/> Textile                    | <input type="checkbox"/> Trucking            |
| <input type="checkbox"/> Waste Management           | <input type="checkbox"/> Water Treatment     |
| <input type="checkbox"/> Window Coverings           | <input type="checkbox"/> Other: _____        |



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## Membership Levels

Please indicate the appropriate membership level below:

- Individuals** **\$200/year**  
*Membership is extended to individuals engaged in the development, distribution, installation, maintenance and use of open systems consistent with the purpose of LONMARK International.*
- Associates** **\$1,000/year**  
*Membership is extended to any firm or corporation that integrates, installs, specifies or distributes products or systems consistent with the purpose of LONMARK International.*
- Partners** **\$5,000/year**  
*Membership is extended to any firm or corporation that manufactures products or systems consistent with the purpose of LONMARK International.*
- Sponsors** **\$20,000/year**  
*Membership is extended to companies committed to the success of LONMARK International by providing leadership and strong financial support, according to standards specified by the board.*

### Payment Method (must check one):

- Membership Fee enclosed**  
(Check or Purchase Order payable to LONMARK International)
- Wire transfer to:** Wells Fargo Bank, Palo Alto, CA 94301 US  
Account # 40200-17059, Acct. Name: LONMARK International  
Routing / ABA No. 121000248, Swift Code: WFBIU6S
- Please bill to Credit Card:**  Visa  MasterCard  American Express  
**Card #** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_  
**Name of Cardholder** (as it appears on card) \_\_\_\_\_  
**Card Security Code#** (usually a 3- or 4- digit number printed on the back of the card) \_\_\_\_\_
- Please check here if you were referred directly by another LONMARK International member.  
**Referring Company Name** \_\_\_\_\_

- PLEASE ENCLOSE PAYMENT OR PURCHASE ORDER FOR THE MEMBERSHIP FEE WITH THIS APPLICATION
- Membership fees are due and payable each year on the membership anniversary date.
- Membership fees are listed in US Dollars.
- Membership rights and privileges are contingent upon acceptance and payment of all fees.
- Membership dues discount subject to membership confirmation in authorized affiliate.

Billing Information

Company Name: \_\_\_\_\_

Primary Billing Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email \_\_\_\_\_

On behalf of the applicant, I affirm that, if accepted for LONMARK International membership, applicant agrees to abide by the rules and policies of LONMARK International and authorizes the use of applicant's name in the formal LONMARK International membership lists and marketing efforts.

Signature: \_\_\_\_\_

Name (Print): \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Date: \_\_\_\_\_

Please mail the completed application, together with payment of the appropriate membership fee in U.S. dollars, to:

Secretary/Treasurer  
LONMARK International  
550 Meridian Avenue  
San Jose, CA 95126 USA  
Tel: +1 408-938-5266  
Fax: +1 408-790-3838  
E-mail: [secretary@lonmark.org](mailto:secretary@lonmark.org)