

# AirFuel Alliance

## MEMBERSHIP APPLICATION

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Applicant Company Name:  www:

### PRIMARY MEMBERSHIP REPRESENTATIVE:

First and Last Name:

Title:

Address/Mail Stop:

City, State, Zip and Country:

Telephone/Fax:

E-mail Address\*:

### ALTERNATE MEMBERSHIP REPRESENTATIVE:

First and Last Name:

Title:

Address/Mail Stop:

City, State, Zip and Country:

Telephone/Fax:

E-mail Address\*:

*\*AirFuel Alliance (the "Corporation") communicates with its member companies exclusively via E-mail.*

### APPLICANT COMPANY PRODUCTS AND SERVICES DESCRIPTION:


### MEMBERSHIP CLASS (Select as appropriate):

☐ Sponsor Member

☐ Full Member

☐ Startup Member

*The rights, benefits and privileges of the member or participant class of AirFuel Alliance of which member is a part, is described in the Bylaws (for voting members within the meaning of Section 5056 of the California Corporations Code), the Membership Agreement or as determined by the AirFuel Alliance Board of Directors (for non-voting participants).*

# AirFuel Alliance

## **MEMBERSHIP FEES:**

The Applicant Company hereto agrees to pay to the Corporation the Membership Fee as set forth in the Corporation Membership Fee Schedule document and in accordance with the Corporation Bylaws. In the event any governmental authority imposes any sales, use or excise tax, duty, custom, levy, fee, or any other tax, charge or fee of any nature whatsoever related to the payment of the Membership Fees (collectively, the "Tax"), Applicant Company/member shall be responsible to pay the Tax in full to ensure the Corporation collects the entire amount of its Membership Fees. Membership Fees may be changed from time to time as determined by the Board of Directors of the Corporation.

**Membership year runs January 1- December 31.**

## **PAYMENT:**

Payment of all Membership Fees must be made in United States Dollars (US\$) in cash, by check, wire transfer of immediately available funds or using a credit card. Contributions in kind will not be accepted.

Upon approval of this Membership Application, the Corporation will issue an invoice to the Applicant Company which is due for payment within thirty (30) days of receipt. The invoice will provide payment and wire transfer instructions. In the event of payment using a credit card, call the Corporation directly for credit card details at +1 (503) 619-0666.

Complete and submit this Membership Application to:

AirFuel Alliance  
3855 SW 153<sup>rd</sup> Dr.  
Beaverton, OR 97003  
Fax: (503) 644-6708  
Email: [admin@airfuelalliance.org](mailto:admin@airfuelalliance.org)

## **AGREEMENT AND AUTHORIZATION:**

This executed by duly authorized representative of Applicant Company Membership Application constitutes an application for admittance by the Applicant Company as a member of the Corporation. The Board of Directors or the Executive Committee of the Corporation, as applicable, reserves the right to request from Applicant Company additional information or evidence necessary to satisfy any of the requirements set forth in this Membership Application and the Corporation Bylaws. Upon submission of this executed Membership Application, the Board of Directors or the Executive Committee of the Corporation, as applicable, will be provided with the Applicant Company's information and, if approved, the Applicant Company will be (i) notified of such fact by the Corporation; (ii) required to pay the Membership Fee; and (iii) required to sign the Corporation's Membership Agreement. Upon approval of the Applicant's Membership Application, the payment of the Membership Fee and the delivery and receipt of a signed copy of this Membership Application and the Membership Agreement, the Applicant shall be admitted as a member in the Corporation.

**Submission of this AirFuel Alliance Membership Application serves as acknowledgement and agreement to the following Corporation documents: Membership Agreement, Bylaws, Intellectual Property Rights Policy, Antitrust Guidelines and Code of Ethics and Conduct.**

# AirFuel Alliance

**Upon becoming a member of the Corporation, Applicant Company agrees to at all times to abide by the policies and procedures of the Corporation, as amended from time to time.**

I certify that I am duly authorized on behalf of my Applicant Company to commit resources, Membership Fees for membership in the Corporation and submit and execute this Membership Application.

**Signature of Corporate Representative:**

Name:

Signature:

Applicant Company Name:

Title:

Date:

Email address:

Phone: