



The Global Voice of Quality®

ORGANIZATIONAL MEMBERSHIP APPLICATION

OFFICE USE ONLY

ITEM CODE ENTMBR19

Order Number _____

Enterprise Member Number _____

Organizational Membership (\$5,000)

All employees of the organization are entitled to membership benefits. Identify one primary contact who will receive all ASQ-related information and can disseminate this information to employees.

- Worldwide access and member pricing for all employees
- All employees can create their own accounts with ASQ to access member-only benefits.

Enterprise Quality Roundtable Membership (\$25,000)

The Enterprise Quality Roundtable helps organizations address the challenges of global business. Through peer-to-peer networking, your company's key contacts and executives will be able to discuss the challenges and find innovations across industries.

- Worldwide access and member pricing for all employees *plus*:
- Your **Dedicated Account Manager** to help strategize how to build your quality culture with ASQ training, certifications, and member communications
- Monthly highlights and networking calls
- Four registrations to ASQ's World Conference on Quality and Improvement
- Executive Roundtable** and exclusive networking events at the ASQ World Conference on Quality Improvement

PRIMARY CONTACT INFORMATION

Mr. Ms. Mrs. Dr. Male Female

First Name _____ Middle Initial _____ Last Name _____

Company _____ Job Title _____

Business Address (If address is a P.O. box please provide a street address for deliveries) _____ Ste. _____

City, State/Province _____ Zip+4/Postal Code _____ Country _____

Area Code/Business Telephone _____ Area Code/Fax _____

Preferred email address _____ Number of employees at your company _____

Full name of organization (for recognition purposes) _____ Industry _____

If you were referred to ASQ by another member, please tell us who referred you:

Member Name _____ ASQ Member Number _____

ADDITIONAL CONTACT INFORMATION

Executive-Level Contact

Contact Name _____ Job Title _____

Email Address _____

Phone Number _____

Quality Learning and Development Contact

Contact Name _____ Job Title _____

Email Address _____

Phone Number _____

- Occasionally ASQ shares its mailing list with carefully selected quality-related organizations to provide you with information on products and services. Please check this box if you **do not** wish to receive these mailings. This is a free service that you may cancel any time by visiting the My Account area of www.asq.org. ASQ does not sell email addresses to third parties.

PAYMENT INFORMATION

- Organizational Membership** (\$5,000).
- Enterprise Quality Roundtable Membership** (\$25,000).
- Canadian residents:** Canadian goods and services tax must be applied.
 NB, NL, NS or PE (15%) ON (13%) Other (5%)
- TOTAL** (with Canadian GST if applicable) \$ _____
- Check, purchase order, or money order (U.S. dollars drawn on a U.S. bank)** Make check payable to ASQ. POs must be printed on company letterhead.
- MasterCard** **Visa** **American Express** (Check one)

Cardholder's Name (please print) _____

Card Number _____ Exp. Date _____

Cardholder's Signature _____

Cardholder's Address _____

For international wire payment, wire funds in U.S. dollars to: PNC Bank N.A.; 4100 W. 150th St.; Cleveland, OH 44135 SWIFT Code: PNCUS33; For credit to American Society for Quality, account # 4245714835

For U.S. wire payment, wire funds in U.S. dollars to: PNC Bank, 411 East Wisconsin Ave.; Milwaukee, WI 53202 PNC Bank Phone Number: 888-762-2265 PNC Bank Fax Number: 1-800-762-5684 PNC Bank accepts EFT formats: CTX, CCD, CTP, and PPD Checking Account Name: ASQ General Fund Checking ABA Routing Number: 041-000-124 Checking Account Number: 4245714835

It is also helpful if you send a fax to ASQ Accounts Receivable at +1-414-765-8676 to let ASQ know the transfer is on the way.

ENTERPRISE MEMBER BENEFIT—MEDIA OPPORTUNITIES

ASQ welcomes the opportunity to serve as an ambassador for your organization, and works with both trade and consumer publications to showcase and share your quality successes when relevant opportunities arise. If you would like us to contact you when appropriate media opportunities become available, please provide the contact information below:

Contact Name _____

Email Address _____

Phone Number _____

Please submit your application with remittance to: ASQ, Attention: Organizational Membership, P.O. Box 3066, Milwaukee, WI 53201-3066 USA or fax to +1-414-272-1734.

Customer Care representatives are available Monday through Friday, 7:00 a.m. – 5:00 p.m. Central.

North America: 800-248-1946 (U.S. and Canada only)

Mexico: 001-877-442-8726

All other locations: +1-414-272-8575

Membership will begin on an agreed-upon date for a period of one year following the receipt of payment and membership information.