



MEMBERSHIP APPLICATION

Thank you for applying for MERS® Link membership. The annual membership fee for this membership is \$250.00 per Org ID. Please provide all information that follows and complete the application as described below.

Company Information

Company Name:			
Company Street Address:			
City:		State:	Zip:
Company Phone:		Company Fax:	
Company Website:			
Executive Sponsor Contact Name:			
Executive Sponsor Contact Email:		Phone:	
Customer Service Contact Name:			
Customer Service Contact Email:		Phone:	
Legal Contact Name:			
Legal Contact Email:		Phone:	
Operational Contact Name:			
Operational Contact Email:		Phone:	
QA Contact Name:			
QA Contact Email:		Phone:	
Sys Admin Contact Name:			
Sys Admin Contact Email:		Phone:	
Billing Contact Name			
Billing Contact Email		Phone:	

Submit the signed application to the MERSCORP Holdings Helpdesk at helpdesk@mersinc.org. Once the application is approved, an invoice will be issued to you to for the membership fee.

I accept the [MERS® Link Membership Terms and Conditions](#).

Name and Title

Signature

Date
