

New Mexico Optics Industry Association (NMOIA)

Fiscal 2007-2008 Membership Application

July 1, 2007 to June 30, 2008

Membership Renewal New Member

Primary Member:

Name _____ (circle one)
Mr. Ms. Mrs. Ph.D.
Title _____
Company Name _____
Mailing Address _____
City _____ State _____ Zip Code _____
Work phone _____ ext. _____ Fax _____
E-mail _____
Company Website Address <http://www.> _____

Contact for NMOIA Directory (if different from Primary Member)

Name _____ (circle one)
Mr. Ms. Mrs. Ph.D.
Title _____
Company Name _____
Mailing Address _____
City _____ State _____ Zip Code _____
Work phone _____ ext. _____ Fax _____
E-mail _____

General Business description

Check all that apply. This information will be used for key-word search on the NMOIA website.

Optics Products

- | | | |
|--|---|--|
| <input type="checkbox"/> Abrasives | <input type="checkbox"/> Connectors | <input type="checkbox"/> Modulators |
| <input type="checkbox"/> Actuators | <input type="checkbox"/> Crystals | <input type="checkbox"/> Photodiodes |
| <input type="checkbox"/> Adhesives, cements, epoxies | <input type="checkbox"/> Data Acquisition | <input type="checkbox"/> Positioning equipment |
| <input type="checkbox"/> Amplifiers | <input type="checkbox"/> Deflectors | <input type="checkbox"/> Prisms |
| <input type="checkbox"/> Analyzers | <input type="checkbox"/> Detectors | <input type="checkbox"/> Scanners |
| <input type="checkbox"/> Apertures | <input type="checkbox"/> Diffractive Optics | <input type="checkbox"/> Sensors |
| <input type="checkbox"/> Attenuators | <input type="checkbox"/> Displays | <input type="checkbox"/> Shutters |
| <input type="checkbox"/> Autocolimators | <input type="checkbox"/> Fiber Optic Components | <input type="checkbox"/> Telescopes |
| <input type="checkbox"/> Beam handling, profiling | <input type="checkbox"/> Filters | <input type="checkbox"/> Vacuum Equipment |
| <input type="checkbox"/> Cameras | <input type="checkbox"/> Gratings | <input type="checkbox"/> Wave plates |
| <input type="checkbox"/> CCD's | <input type="checkbox"/> Lasers | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Choppers | <input type="checkbox"/> Lenses | |
| <input type="checkbox"/> Coatings | <input type="checkbox"/> Light emitting diodes | |
| <input type="checkbox"/> Collimators | <input type="checkbox"/> Mirrors | |

Optics Services

- | | | |
|---|---|-----------------------------------|
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Machining | <input type="checkbox"/> Safety |
| <input type="checkbox"/> Custom | <input type="checkbox"/> MEMS | <input type="checkbox"/> Software |
| <input type="checkbox"/> Design & Engineering | <input type="checkbox"/> Mechanical systems | <input type="checkbox"/> Testing |
| <input type="checkbox"/> Data processing | <input type="checkbox"/> Optics systems | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Grinding | <input type="checkbox"/> Polishing | _____ |

Other Services

- | | | |
|--------------------------------------|-------------------------------------|---------------------------------|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Consulting | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Insurance | _____ |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Training | |

Please provide a 100 word (maximum) description of your company that we can use on the website and in the NMOIA Directory. Also, provide a list of other employee that you would like to list in the directory, receive NMOIA broadcast emails, and have member privileges at NMOIA events. (see Membership info below for the number of employee members for each membership class).

Provide the billing name and address, if different from name and address of primary member.

Your Membership

Check One	Number of Employees	Type of Membership	Additional Employee Memberships	Annual Fee
	<10	Optics Corporation	2	\$100
	10 to 75	Optics Corporation	5	\$250
	>75	Optics Corporation	10	\$500
		Affiliate-Gov, Labs, Academic	Unlimited	\$500
		Associate--Non-profits & non-optics companies		\$250 and \$50 per named member
		Sustaining Sponsor	Unlimited	\$2000
		Supporting Sponsor	10	\$1000
		Sponsor	5	\$500
Note: This is a corporate membership and is not transferable to an individual.				

- Invoice my company. Payment in the form of a check payable to **NMOIA** is enclosed.

Mail to:
 NMOIA
 851 University Blvd., SE, Ste 203
 Albuquerque, NM 87106

Fax to:
 505-858-0404

OR

Can you recommend other companies that we should invite to join NMOIA? (Please provide contact information).

Questions? Please email or call us. Calls should be directed to Margaret Coombs, 505-450-9947 or margaret@nmoia.org.

Thank you for your interest in NMOIA and your membership

Privacy Policy,

Your information will NOT be resold or provided to others, except for information that you provide specifically for the NMOIA Public Directory. The Directory will be maintained on the NMOIA web site and print and electronic copies may be distributed at trade shows or upon request to NMOIA.