

## RIA R15 Standards Sub-committee Application

The Robotic Industries Association sponsors development of ANSI and ISO standards applicable to the robotic industry. Drafting committees are formed for various topics of interest. Participation is open to "anyone with a direct and material interest" in the work being done. Participation is divided into Voting and Associate memberships. Voting members representing companies must have the express backing of their employer to ensure availability to travel and attend scheduled meetings.

We have a direct and material interest in the RIA Standards Development work and hereby apply to participate in the sub-committee work.

COMPANY NAME:		
ADDRESS:		
CITY:	STATE/PROVINCE:	ZIP/POSTAL CODE:
CONTACT NAME:		
TITLE:		
PHONE:	FAX:	
E-MAIL:		

<b>OUR INTEREST(S) AREAS ARE:</b> <input type="checkbox"/> INTERFACES <input type="checkbox"/> COMMUNICATION <input type="checkbox"/> PERFORMANCE <input type="checkbox"/> SAFETY <input type="checkbox"/> SIMULATION/OFF LINE PROGRAMMING	<b>OUR INTEREST CATEGORY IS:</b> <input type="checkbox"/> PRODUCER <input type="checkbox"/> SUPPLIER <input type="checkbox"/> USER <input type="checkbox"/> RESEARCHER <input type="checkbox"/> GENERAL INTERST	<b>WE REQUEST:</b> <input type="checkbox"/> INDIVIDUAL MEMBERSHIP <input type="checkbox"/> CORPORATE MEMBERSHIP <hr/> <b>WE REQUEST CONSIDERATION FOR:</b> <input type="checkbox"/> ASSOCIATE MEMBERSHIP <input type="checkbox"/> VOTING MEMBERSHIP
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Statement of Interest and Qualifications

The certification below is required if requesting consideration for voting membership.

Certification of Support Statement	
I hereby certify that our designated representative(s) will have full corporate backing for attending meetings and fully participating in standards development work with the RIA.	
Name:	Authorized Signature:
Title:	Date:

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Our **DESIGNATED REPRESENTATIVE** is:

NAME:		
TITLE:		
E-MAIL:		
PHONE:	FAX:	
ADDRESS: (IF DIFFERENT THAN MAIN COMPANY ADDRESS):		
CITY:	STATE/PROVINCE:	ZIP/POSTAL CODE:
I hereby agree to abide by the Code of Conduct applicable to RIA standards sub-committees		
APPLICANTS SIGNATURE (ORIGINAL):		DATE:

Our **DESIGNATED ALTERNATE** is:

NAME:		
TITLE:		
E-MAIL:		
PHONE:	FAX:	
ADDRESS: (IF DIFFERENT THAN MAIN COMPANY ADDRESS):		
CITY:	STATE/PROVINCE:	ZIP/POSTAL CODE:
I hereby agree to abide by the Code of Conduct applicable to RIA standards sub-committees		
APPLICANTS SIGNATURE (ORIGINAL):		DATE:

### For RIA Action Only (Do Not Complete)

Received:	RIA Member: <input type="checkbox"/> Yes <input type="checkbox"/> No	Review Action: Interest category <input type="checkbox"/> Voting <input type="checkbox"/> Associate	
Action complete:	Applicant notified:	Approved Class:	Balance Check: <input type="checkbox"/> <input type="checkbox"/> Disapproved