

## Digital Stationery Consortium, Inc. Membership Agreement

Please complete and submit **one** executed (signed) copy of this agreement to apply for membership in Digital Stationery Consortium, Inc.

**Membership Term:** Membership is for one calendar year starting the date payment is received. All rights & privileges will begin upon receipt of payment in full of the required membership dues.

**To Submit Agreement (choose one of the following options)**

**Mail to:**

Digital Stationery Consortium, Inc.,  
c/o Wacom Technology Corporation,  
1455 NW Irving St, Suite 800, Portland,  
OR 97209, USA

**Email to:**

[membership@digitalstationeryconsortium.org](mailto:membership@digitalstationeryconsortium.org)

### Organization Information

Organization Name:

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Organization Address:

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Organization URL:

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### Contact Information

**Designated Representative:** (Will serve as the main contact to Digital Stationery Consortium, Inc. on behalf of the organization. All legal and financial notices from Digital Stationery Consortium, Inc. will be sent to this e-mail address unless directed otherwise)

Name:

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Title:

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Address:

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Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Alternate Designated Representative:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Billing contact:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Marketing/PR Contact:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

## Membership Level Information

Please select a Membership Level

<u>Level</u>	<u>Membership Dues</u>
<input type="checkbox"/> CONTRIBUTOR	\$20,000
<input type="checkbox"/> PROMOTER (Enterprise)	\$3,000
<input type="checkbox"/> PROMOTER (Startup*)	\$1,000**
<input type="checkbox"/> PROMOTER (Nonprofit/Academic)	\$500**

\* Note: Must have less than 10 employees and under \$500k in revenue to qualify

\*\*Dues waived for initial 1-year term

## Payment Information

Choose One of the Following Payment Methods

**Note:** Payment is due within 45 days of approval of the completed agreement

**CHECK:** Enclose check (*payable in U.S. dollars to Digital Stationery Consortium, Inc.*) and mail with one signed copy of this form.

**SEND INVOICE**

**Billing contact:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## General Terms & Conditions

(1) By the signature of its authorized representative below, Applicant, including its Affiliates (as defined in Bylaws), agrees to be bound by the terms hereof, as well as the terms and conditions stated in the Certificate of Incorporation, Bylaws, the Antitrust Guidelines and other rules, policies or guidelines (the “Organizational Documents”) of Digital Stationery Consortium, Inc. (“DSC”) as may apply to the Membership Levels stated in Bylaws. Copies of the Organizational Documents are available for review at [www.digitalstationeryconsortium.org](http://www.digitalstationeryconsortium.org). Applicant is encouraged to review these materials prior to the execution of this Agreement.

(2) No Membership Agreement is binding on DSC unless accompanied by the initial membership dues as noted above. By signing below, the individual executing this Agreement on behalf of Applicant warrants that he or she has all requisite signing authority for and on behalf of the entity seeking entry.

(3) The term of membership as a Contributor Member shall be on a year-to-year basis and shall be automatically renewed for additional one (1) year terms, subject to the reasonable discretion of DSC, unless a written notice of non-renewal is provided by the Contributor Member ninety (90) days prior to the expiration of the then current term. DSC will invoice the then current renewal dues to the Contributor Member sixty (60) days prior to the expiration of the then current term, and the Contributor Member shall promptly pay the appropriate renewal dues, upon which payment the Contributor Member’s participation shall be deemed to be renewed on the same terms and conditions as during the previous term. Failure to make a timely renewal payment shall be cause for suspension and termination of this Agreement and all Contributor Member benefits.

The term of membership as a Promoter Member shall be on a year-to-year basis and a Promoter shall provide a written notice of non-renewal sixty (60) days prior to the expiration of the then current term if it wishes not to renew the membership. DSC will invoice the then current renewal fees to the Promoter Member sixty (60) days prior to the expiration of the then current term, and the Promoter Member’s payment thereof shall constitute a renewal of membership as a Promoter Member, subject to the reasonable discretion of DSC. Failure to make a timely renewal payment shall be cause for suspension and termination of this Agreement and all Promoter Member benefits.

(4) The undersigned agrees that once accepted, all membership dues are nonrefundable for any reason, including termination of this Agreement. There is no duty on the part of DSC to renew this Membership Agreement, and renewal may only be accomplished as set forth above.

(5) Any claim or dispute arising under or relating to this Membership Agreement shall be governed by the internal substantive laws of the State of Delaware, without regard to principles of conflict of laws.

(6) Information relating to an identified or identifiable natural person (“Personal Data”) is collected herein to permit DSC to contact the member, in connection with this agreement or its membership status. A party located in the European Union or Economic Area wishing to exercise rights under the General Data

Protection Regulation (“GDPR”) with respect to such Personal Data may contact.

[membership@digitalstationeryconsortium.org](mailto:membership@digitalstationeryconsortium.org)

Applicant Authorization:

\_\_\_\_\_  
(Print Organization Name)

By: \_\_\_\_\_  
(signature)

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_