



Application for Membership

Thank you for your interest in Membership in BioNJ! Please join us!

As the industry's voice in New Jersey, we fulfill our mission by propelling the New Jersey biopharmaceutical industry forward in support of Patients. We do this by driving capital formation and fostering entrepreneurship; advocating for public policies that advance medical innovation; facilitating peer to peer networking and knowledge sharing; providing access to talent and education; and offering a cost-saving array of critical commercial resources.

Company Information (This must be completed.)

| | |
|-------------------------|---------------------------------|
| Organization Name _____ | Telephone Number _____ |
| Address _____ | Website _____ |
| City/State/Zip _____ | Date of Application _____ |
| County _____ | Total Number of Employees _____ |
| Country _____ | |

**** Does your organization have laboratories in NJ? _____ Is your organization headquartered in NJ? _____**

****Please attach a 50-100 word company description to your application. This is required in order to process your application.**

Membership Categories - Please select one. (See detailed list of benefits at BioNJ.org/benefits-overview.)

- **Market Maker Member:** Organizations that affiliate with BioNJ at the highest level of support become our most esteemed partners and associates in the work of advancing the vitality and awareness of the most important industry in New Jersey and enjoy the highest level of benefits. Annual dues are \$50,000.
- **Preferred Member:** Organizations that elect to become Preferred Members make a clear commitment and investment in the growth of the industry in NJ by supporting legislative and regulatory efforts, life science business activities, business networking and education. Annual dues are \$30,000.
- **Executive Member:** Organizations that choose to become Executive Members demonstrate their interest in fostering the growth of the biopharmaceutical industry in NJ along the entire spectrum of activities supported by the Association. Annual dues are \$16,000.
- **Innovation Member (R & D Companies):** Any corporation, partnership, association or other entity, with research and development activities that principally involve biopharmaceutical research and development, manufacturing, diagnostics, drug discovery and technology transfer is eligible for Innovation Membership. These Members have voting rights. Dues are based upon the total number of people employed by the company. Annual dues are: \$350 for 1-10 employees for the first year (\$650 thereafter); \$1,700 for 11-20 employees; \$2,200 for 21-50 employees; \$4,200 for 51-100 employees; \$5,700 for 101-200 employees; \$6,700 for greater than 200 employees; and \$4,200 for greater than 300 employees with *sales only in NJ*.
- **Associate Member (Service Provider Companies):** Any corporation, partnership, association or other entity providing services or products of benefit to R&D companies is eligible for Associate Membership. Dues are based upon the total number of employees. Annual dues are \$950 for fewer than 3 employees, \$1,450 for 4-10 employees; \$2,400 for 11-50; \$4,200 for 51-100 employees; \$5,200 for 101-200 employees; \$6,200 for 201-300 employees; \$7,700 for greater than 300 employees and \$4,200 for greater than 300 employees with *sales only in NJ*.
- **Institution Member:** Any non-profit institution not generally eligible for Innovation Membership, working in support of the industry, is eligible as an Institution Member. Annual dues are \$1,750.
- **International Member:** Any foreign enterprise, non-profit or government organization that does not have a USA presence is eligible for International Membership in order to support and interact with the biopharmaceutical industry in New Jersey and use New Jersey as a landing pad for regional USA business development and exploration. Annual dues are \$1,500.
- **In-Transition Member:** This category is reserved for individuals currently seeking employment opportunities in the biopharmaceutical industry, with no current company (employment) affiliation. Annual dues are \$150.
- **Student Member:** Any student currently enrolled in college or graduate school with an interest in the industry is eligible for Student Membership. A copy of a student I.D. must accompany the application. Annual dues are \$50.
- **Entrepreneur-in-Training and Patient Advocacy organizations may apply for membership. A separate application is required. Please contact BioNJ Headquarters at 609-890-3185 for more information.**

What classification(s) best describe your organization? (Please circle all that apply.)

- | | | | |
|-----------------------------------|--------------------------------|---------------------------------|------------------------|
| Academic | Communications, Marketing & PR | Hospital | Packaging/Delivery |
| Agricultural/Industrial | Consumer Products, Flavors | Human Diagnostic Development | Publications |
| Biobanking & Bioprocessing | and Fragrances | Human Resources & Staffing | Real Estate & Property |
| Bioinformatics | Contract Manufacturing | Information Technology | Development |
| Biotechnology | Contract Research | Insurance | Research Institute |
| Business and Financial Consulting | Digital Health/Data Science IT | International Trade & | Research Supplies& |
| Cell & Gene Therapy | Drug Delivery Technology | Economic Development | Instrumentation |
| Cleanroom Operations & | Drug Development | Investment & Capital Firms | Other _____ |
| Mechanics | Drug Discovery | Legal and Intellectual Property | |
| Clinical Research | Financial Services | Manufacturing | |
| Clinical Research Center | Government | Medical Device | |

Research Areas: (Please circle all that apply.)

- | | | | |
|-------------------------|-------------------------|--------------------|---------------------------------|
| Autoimmune/Inflammation | Neuroscience | Infectious Disease | Rare Diseases/Genetic Disorders |
| Biodefense | Gastrointestinal | Musculoskeletal | Respiratory |
| Cardiovascular | Generics/Biosimilars | Nutrition | Vaccines |
| Cell & Gene Therapy | Genitourinary | Oncology | Other _____ |
| Dermatology | Hematological | Ophthalmology | |
| Endocrine/Metabolic & | Immunotherapy/Precision | Orthopedic | |
| Women's Health | Medicine | Pain | |

Employee Information

CEO/President - Name & Title & E-mail

CFO/Finance - Name & Title & E-mail

Business Development - Name & Title & E-mail

Purchasing - Name & Title & E-mail

Human Resources - Name & Title & E-mail

Legal - Name & Title & E-mail

Chief Scientific Officer - Name & Title & E-mail

Corporate Communications - Name & Title & E-mail

Key Membership Contact Information

Main Contact/Dues Invoice Contact Name

Dues Invoice Contact if different from Main Contact

Title

Title

Direct Tel. Number/Fax Number

Direct Tel. Number/Fax Number

E-mail

E-mail

Payment

Dues Amount: \$_____ (Please make check payable to BioNJ. BioNJ is a 501(C) (6) tax exempt organization. BioNJ's tax ID number is: 22-3284393.)

Statement of Support of BioNJ Principles and Agreement to BioNJ Information Practices

BioNJ membership is available only to bona fide organizations that promote biopharmaceutical research and support the growth and development of the biopharmaceutical industry; and to organizations with public policy positions and business practices that are generally consistent with BioNJ's reputation and its policies and principles in support of innovation, including intellectual property, as determined by the Board of Trustees. BioNJ reserves the right to review applications for membership to confirm that the applicant meets these criteria for membership and for the specified categories of membership as per BioNJ's bylaws. BioNJ may, in its sole discretion, reject an application for membership or elect not to renew a membership.

I, _____, on behalf of _____ (hereafter "Company"), affirm that the applicant generally supports BioNJ's public policy positions, and that the positions and business practices of Company are generally consistent with BioNJ's reputation and its policies and principles in support of innovation, including intellectual property.

I understand and agree that BioNJ and its partners may use the Company contact information and the personal information for the individuals listed in the Company's BioNJ Membership Application Form (the "Contacts") for a number of purposes, including: to communicate with the Company and the Contacts via telephone or through mail, facsimile, email or any other mode of communications; to provide notices and information to the Contacts about BioNJ, its activities and meetings and services, as well as its partners and their products and services; to maintain the information in its databases for use by BioNJ and its partners for the activities listed above and other activities that may be approved by BioNJ in the future. I acknowledge that this consent shall continue until receipt of a written request to BioNJ requesting that it discontinue use of the Information.

Signature

Date

Please send your completed application and dues payment to: BioNJ, 1255 Whitehorse-Mercerville Road, Building B-Suite 514, Trenton, NJ 08619. Please note that membership is subject to approval and receipt of a completed membership application, organization description and dues payment. Upon approval, you will receive a confirmation email containing important membership information. Thank you.