



# FUJI SYNAPSE USERS NETWORK

## MEMBERSHIP APPLICATION

Name of Institution				
Address				
City	State	Zip		
Phone	Fax			<b>Opt-In Online Directory</b>
			Yes	No
<b>Primary Representative</b>	Title	E-mail		
			Yes	No
Alternate Representative	Title	E-mail		
			Yes	No
Alternate Representative	Title	E-mail		
			Yes	No
Alternate Representative	Title	E-mail		
			Yes	No

*The primary representative will hold all voting rights. When the primary representative is not in attendance, an alternate may cast the vote. Limit of 5 representatives per institution.*

- FUSUN annual dues:
- SIIM Institutional Member - \$100 USD
  - Non-SIIM Institutional Member - \$200 USD
  - All new and existing Synapse institutions will receive a one-year complimentary membership upon receipt of a completed application in the SIIM Office

**PAYMENT:**

- Check enclosed in U.S. Dollars to: FUSUN (Preferred method of payment)

Credit Card:       VISA                       MasterCard                       AMEX                       Discover

Credit Card Number: \_\_\_\_\_ Expiration date (MM/YY): \_\_\_\_\_

Security Code (3 Digits): \_\_\_\_\_ Zip code of credit card billing address (US only): \_\_\_\_\_

Authorizing Signature: \_\_\_\_\_

Return this completed application to:

FUSUN  
 19440 Golf Vista Plaza, Suite 330  
 Leesburg, Virginia 20176  
 Phone: (703) 723-0432 Fax: (703) 723-0415  
 fusun@siimweb.org • www.fusun.org

Direct questions about FUSUN membership or SIIM institutional membership to the SIIM office at fusun@siimweb.org