

## APPLICATION FOR INSTITUTIONAL MEMBER

### INSTITUTIONAL MEMBER DESCRIPTION

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Institutional Members play a key role in DCMI governance through the active participation of their respective Voting Representatives in the deliberations and decisions of the DCMI Governing Board. Institutional Members are DCMI *Voting Members*.

An Institutional Member is a public entity, a not-for-profit organization, a governmental agency, a quasi-governmental agency or a supra-governmental agency. However, Institutional Members need not be incorporated entities if otherwise recognized by DCMI. An Institutional Member may be an entity within the "Locale of influence" of a Regional Member. For general information on rights and obligations, review <http://dublincore.org/support/>.

*NOTE: If you are a for-profit organization, please use the application form for the Supporting Member program.*

### VOTING MEMBERSHIP

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As *Voting Members*, Institutional Members appoint a Representative to the *Governing Board* to act on the Member's behalf in all governance matters brought before the *Governing Board* including the election of the representative officers of the *Board* who provide oversight for both the daily operations of DCMI and the work of the managing *Directorate*.

In addition to participation in regularly scheduled quarterly *Governing Board* conference calls, the Institutional Member Representative is expected to participate, either in person or electronically, in the *Board's* meeting at DCMI's annual conference. Free registration for the Institutional Member Representative to attend the annual meeting is included in the annual membership dues. The Institutional Member covers travel expenses to the annual meeting for its Representative.

### MEMBERSHIP DUES

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**The annual membership fee for Institutional Members is US\$3,000.** The *Governing Board* annually reviews the dues structure and makes adjustments according to then prevailing circumstances. Any resulting changes become effective the following membership year.

The initial year of membership does not commence until the dues payment is transferred to ASIS&T's bank account. Dues payments in subsequent years will fall due on the membership anniversary.

# APPLICATION FORM

## ORGANIZATIONAL INFORMATION

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ORGANIZATION NAME: \_\_\_\_\_

AUTHORIZING OFFICER: \_\_\_\_\_

### PRINCIPAL LOCATION/CONTACT ADDRESS OF ORGANIZATION

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROVINCE: \_\_\_\_\_

ZIP/POSTAL CODE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WEBSITE URL: \_\_\_\_\_

## OFFICIAL REPRESENTATIVE TO THE GOVERNING BOARD

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LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

POSITION TITLE: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROVINCE: \_\_\_\_\_

ZIP/POSTAL CODE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WEBSITE URL: \_\_\_\_\_

## ALTERNATIVE REPRESENTATIVE TO THE GOVERNING BOARD

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LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

POSITION TITLE: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROVINCE: \_\_\_\_\_

ZIP/POSTAL CODE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WEBSITE URL: \_\_\_\_\_

## INSTRUCTIONS ON PAYMENT OF DUES

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DCMI *Supporting Member* annual dues are paid either by **bank transfer** or by **mailing a check** using the following information:

### PAYEE INFORMATION

**Payee Name:** ASIST-DCMI  
**Payee Address:** 8555 16<sup>th</sup> Street, Suite 850,  
Silver Spring, Maryland, USA 20910  
**Phone:** +1 301 495-0900 (Voice) +1 301 495-0810 (Fax)

### BANK TRANSFR INFORMATION

**Bank Name:** BANK OF AMERICA  
**Bank Address** 6001 MONTROSE ROAD, ROCKVILLE, MD USA 20852  
**Deposit #:** 446026579771  
**Routing #:** 026009593  
**SWIFT Code:** BOFAUS3N

## SUBMITTING THE APPLICATION

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To submit your application for *Institutional Member* membership:

1. Complete the Application Form and scan as a PDF;

2. Prepare images for use on the DCMI website and in DCMI promotions. Submit the images in .png, .gif, or .jpg file format. The images should be of sufficient quality to reproduce effectively at 350px in width (the larger the image, the better). Include images of:
  - The **Institutional Member's** logo (preferably with transparent background); and
  - A portrait image of the **Institutional Member's** appointed representative for the Governing Board web page (<http://dublincore.org/about/oversight/>).
3. Complete payment to ASIS&T for US\$3,000 (check or bank transfer);
4. Email the completed Application Form PDF and the image files to [dcmi-payment@asist.org](mailto:dcmi-payment@asist.org); and
5. DCMI will email an acknowledgement of payment to the **Institutional Member Representative** upon payment of the dues. The appointed Representative will be added to the relevant mailing lists, welcomed to the *Governing Board* and provided with member login credentials.