



Content Archive Resource Exchange LEXicon Membership Application

Applicant Information

Company Name

Company Contact Name

Department/Division

Primary Contact email

Direct Phone

Fax

Primary Contact Address

City

State

Zip

Billing Information (if different from above)

Billing Contact Name

Billing Contact email

Phone

Fax

Invoice Mailing Address

City

State

Zip

Membership Information

Please complete both sections. Membership dues are based upon company size and the level of benefits desired. See Membership Benefits and Fees for details.

Number Employees (select one)

25,000+ 10,000-24,999 1,000-9,999 1,000-9,999 100-999 25-99 25-99 1-24

Membership Level (select one)

Enhanced Membership

Full Membership

Basic Membership

Authorized by

Date

Membership Interest Areas

Indicate areas where you stand to benefit most from improved data exchange (interoperability):

Electronic Trial Master File

Inter-system (i.e. CTMS – EDC – eTMF)

IRB-IEC communication

Clinical Study Report/Medical Writing

Safety communication

Other: _____



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| Membership Benefits | Enhanced | Full | Basic |
|---|----------|------|-------|
| Access to CareLex Expert Forums for Content Model development & Controlled Vocabulary curation of existing and new domains. | X | X | X |
| Access to CareLex Sharing Portal to share your custom-tailored eTMF domain or other domain schemas with others for operational continuity. | X | X | X |
| Download and use of CareLex's Content Model Viewer to easily view custom schemas tailored to your needs (requires free Protégé' editor or own software application). | X | X | X |
| Download access to extended metadata Database and new Content Model Domains. | X | X | X |
| Free on line training on eTMF Standard and 20% discounts on all CareLex education courses and trainings. | X | X | |
| Membership recognition with logo placement on CareLex website. | X | X | |
| eTMF Standard Professional or Expert Certification (Live Webinars & Testing) for 5 practitioners per year. | X | | |
| Additional membership recognition with logo placement in CareLex presentations and materials. | X | | |
| CareLex Advisory Board Participation and Expert Forum leadership opportunities. | X | | |

| Number of Company Employees | Basic | Full | Enhanced | One-time, first year Enhanced membership contribution |
|-----------------------------|----------|----------|----------|---|
| <25 | \$1,000 | \$2,000 | \$3,000 | \$3,000 |
| 25 - 99 | \$3,100 | \$4,500 | \$5,250 | \$5,250 |
| 100 - 999 | \$6,500 | \$7,750 | \$8,500 | \$8,500 |
| 1,000 - 9,999 | \$12,000 | \$16,000 | \$18,000 | \$18,000 |
| 10,000 - 24,999 | \$18,000 | \$21,750 | \$24,000 | \$24,000 |
| 25,000+ | \$25,000 | \$28,500 | \$30,000 | \$30,000 |

Return to: admin@carelex.org or 2865 Sunrise Blvd., Ste. 218, Rancho Cordova, CA 95742