



**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):

- |   |  |
|---|--|
| <input type="checkbox"/> Electronic Trial Master File | <input type="checkbox"/> Inter-system (i.e. CTMS – EDC – eTMF) |
| <input type="checkbox"/> IRB-IEC communication        | <input type="checkbox"/> Clinical Study Report/Medical Writing |
| <input type="checkbox"/> Safety communication         | <input type="checkbox"/> Other: _____                          |



## Content Archive Resource Exchange LEXicon Membership Application

<span style="font-weight: bold; font-size: 1.2em;">Membership Benefits</span>	Enhanced	Full	Basic
Access to CareLex <b>Expert Forums</b> for Content Model development & Controlled Vocabulary curation of existing and new domains.	X	X	X
Access to CareLex <b>Sharing Portal</b> 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 <b>Content Model Viewer</b> to easily view custom schemas tailored to your needs (requires free Protégé' editor or own software application).	X	X	X
Download access to <b>extended metadata Database</b> and new Content Model Domains.	X	X	X
<b>Free on line training on eTMF Standard</b> and <b>20% discounts</b> on all CareLex education courses and trainings.	X	X	
<b>Membership recognition</b> with logo placement on CareLex website.	X	X	
eTMF Standard Professional or Expert <b>Certification</b> (Live Webinars & Testing) for 5 practitioners per year.	X		
<b>Additional membership recognition</b> with logo placement in CareLex presentations and materials.	X		
CareLex <b>Advisory Board Participation</b> 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](mailto:admin@carelex.org) or 2865 Sunrise Blvd., Ste. 218, Rancho Cordova, CA 95742