



# Membership and Renewal Form

## Membership Contacts & Membership Type

Company Name: \_\_\_\_\_

	<b>Administrative Contact</b>	<b>Billing Contact (if different)</b>
Name:	_____	_____
Title:	_____	_____
Email:	_____	_____
Telephone:	_____	_____
Mailing Address:	_____	_____
	_____	_____

Membership Type: Corporate: \$300/yr  Individual: \$60/yr  (check one)

Please make checks payable to **QUSER** and bring to the next meeting, or remit to: QUSER,  
(remember to include the completed Membership and Renewal Form) PO Box 40062,  
St Paul, MN 55104

## Member Organization Information

Exclude information from Membership Directory:  (check to exclude)

Company industry: \_\_\_\_\_

Provide products or services to the IT industry?  Yes  No (check one)

Company profile: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Meeting Announcement Distribution List (Optional)

Administrative Contact will automatically receive all meeting announcements

Name	Email Address
_____	_____
_____	_____
_____	_____
_____	_____

**QUSER is a not-for-profit organization serving users of IBM Power Systems™ servers**

QUSER  
PO Box 40062  
St Paul, MN 55104  
www.quser.org