



American College of Toxicology

Corporate Membership Application

Company Name: _____
(As you wish it to appear in all marketing collateral)

Street: _____

City: _____ State: _____ Zip: _____

Tel: _____ Fax: _____

Contact Name: _____ Title: _____

Email: _____ Website: _____

Please indicate your organization type:

Contract Research Organization Government Agency Laboratory Equipment/Supplies

Nonprofit Scientific Organization Pharmaceutical Toxicology Consulting

Other—please describe: _____

American College of Toxicology: Policy on External Financial Support

The American College of Toxicology (ACT) reserves the right to refuse, or restrict the use of, external financial support from any organization whose goals, objectives, or past actions are inconsistent with the mission of the College, which is to educate, lead, and serve the global community. Furthermore, ACT is committed to high ethical standards and sound scientific principles and will not be influenced by financial contributions.

All supporters must demonstrate relevance to the field of toxicology. All corporate support funding is subject to periodic review and reevaluation as needed.

Do you confirm the financial support offered by your organization is unrestricted with no conditions or requirements proposed by the applicant beyond the benefits as described on the [ACT website](#)? Yes No

Do you agree to comply with [ACT's Code of Ethics as noted on the website](#)? Yes No

Authorized Signature: _____ Date: _____

PAYMENT: Please select your Corporate Membership package:

\$3,500 Corporate Partner \$2,000 Corporate Contributor Payment will be processed on approval of application.

All payments must be in US Dollars

American Express Mastercard Visa

Card Number: _____ Exp. Date: _____

Signature: _____ Name on Card: _____

Check enclosed—payable to: American College of Toxicology (*Contact ACT for Wire Transfer instructions-bank fees may apply)

Retain a copy for your records and remit to:

American College of Toxicology
11190 Sunrise Valley Drive, Suite 300
Reston, VA 20191

Tel: 703.547.0875, ext. 1455; Fax: 703.438.3113; Email: acthq@actox.org