

Corporate membership is valid for 12 months & is based on sales in the document and identity security market

Membership Categories

Benefactor – \$7,500

*Any organization who wishes to support DSA through special recognition as a Benefactor**

Corporate Level 1: \$4,500

Any organization with sales in document and identity security market segment over \$10 Million

Corporate Level 2: \$3,500

Any organization with sales in document and identity security market segment 5-\$10 Million

Corporate Level 3: \$2,000

Any organization with sales in document and identity security market segment under \$5 Million

Individual Associate Member: \$500.00

Government Membership: \$0.00

Academic Membership: \$0.00

**The Benefactor category has been established for members who wish to contribute a little extra to our organization in exchange for more prominent recognition on our website, in DSA communications, at events, and at member meetings.*

DSA Mission Statement

DSA is an alliance of government, industry and academia dedicated to securing the production, issuance, and authentication of identity, credentials, and currency to help combat fraud and other criminal acts by drawing upon the knowledge and technical disciplines of its members. Our efforts are focused on increasing awareness of the problems associated with counterfeiting and identity theft. DSA serves as a resource for public and private organizations that are seeking to build their understanding of existing and emerging solutions.

Our objective is to aid in the fight against terrorism, illegal immigration, identity theft, counterfeit currency, contraband goods, espionage, human trafficking, and other criminal acts that benefit from the use of fraudulent documents and identity. We maintain a globally recognized controlled-access glossary of security features and their attributes, available exclusively to members & government entities.

It is the objective of the Document Security Alliance to have all members actively participate in this alliance, sub-committee activities, and the quarterly meetings. DSA members are not to use the DSA meetings for marketing company products or services, but rather to contribute beneficial information that will be advantageous to the DSA, government agencies, academia, and the private sector.

Application should include the names of two existing DSA companies as *sponsors

Application Fee:

- All new non-government (Federal, State) or non-academic applications must be accompanied by a **\$200.00** non-refundable application fee prior to the application being processed.
- Applications will be vetted by the Membership Committee. You will be notified on the status of your application within three weeks.

Please use the attached form to select Corporate Level and submit payment.



Membership Application

PLEASE SUBMIT FORM WITH PAYMENT

Member one (main representative)

Organization: _____
Name: _____ Title: _____
Address: _____
City _____ State _____ Zip _____
Country: _____ Telephone: _____
Fax: _____ Email address: _____

Company Description:

[Empty box for Company Description]

Your objective for joining DSA & interest in being a part of DSA Committees:

[Empty box for objective and interest]

Please select your category of membership: To pay by credit card, a surcharge of 3% of will be added to your bill.

- Benefactor - \$7,500.00 (\$7,725.00 to pay via credit card)
Corporate Level 1 - \$4,500.00 (\$4,635.00 to pay via credit card)
Corporate Level 2 - \$3,500.00 (\$3,605.00 to pay via credit card)
Corporate Level 3 - \$2,000.00 (\$2,060.00 to pay via credit card)
Individual Associate: \$500 (\$515.00 to pay via credit card)
Government - \$0

- Academic - \$0
Application Fee - \$200
Sponsors: (two existing DSA member organizations)
1. _____
2. _____

Payment Options:
Make checks payable to: Document Security Alliance
Send to: 515 2nd Street, NE, Washington, DC 20002
(202) 543-5552

Wire Transfer Information:
Routing Number: 054000056
Account Number: 10107433
National Capital Bank 316 Pennsylvania Avenue
Southeast, Washington, DC 20003 (202-546-8000)

Pay via credit card: (*service charge will be added)
Name on card _____
Organization _____
Card number _____
Expiration _____
Sec Code _____
check here if same address as above
Or complete information below:
Billing Address _____
City, State, Zip _____
Phone, Email _____