



PDA Membership Application

CONTACT INFORMATION

Are you activating a new member account or renewing/updating an existing profile?

- New Renewing Membership Updating Profile

Job Sector

- Academic Health Authority Industry
 Retired Student

- Mr. Mrs. Ms. Mx. Dr. Prof.

Indicate the year you began working in the industry

(YYYY)

Name (First, Middle Initial, Last)

Organization Name

Job Title

- Home Address Work Address

Mailing Address

City

State/Province

ZIP+4/Postal Code

Country

Email (NOTE: Your email address will become your username for your PDA login)

Telephone

AREAS OF INTEREST

- | | | |
|---|---|--|
| <input type="checkbox"/> Advanced Therapy Medicinal Products (ATMP) | <input type="checkbox"/> GMP Links to Pharmacovigilance | <input type="checkbox"/> Process Validation |
| <input type="checkbox"/> Advanced Virus Detection Technologies | <input type="checkbox"/> Inspection Trends | <input type="checkbox"/> Quality Risk Management |
| <input type="checkbox"/> Applied Statistics | <input type="checkbox"/> Lyophilization | <input type="checkbox"/> Quality Systems |
| <input type="checkbox"/> Biopharmaceutical Manufacturing | <input type="checkbox"/> Management of Outsourced Operations | <input type="checkbox"/> Regulatory Affairs |
| <input type="checkbox"/> Biosimilars | <input type="checkbox"/> Microbiology/Environmental Monitoring | <input type="checkbox"/> Sterile Processing |
| <input type="checkbox"/> Combination Products | <input type="checkbox"/> Packaging Science, Container Development | <input type="checkbox"/> Supply Chain Management |
| <input type="checkbox"/> Data Integrity | <input type="checkbox"/> Pharmaceutical Water Systems | <input type="checkbox"/> Technology Transfer |
| <input type="checkbox"/> Facilities and Engineering | <input type="checkbox"/> Pharmacopeial | <input type="checkbox"/> Vaccines |
| <input type="checkbox"/> Filtration | <input type="checkbox"/> Pre-Filled Syringes | <input type="checkbox"/> Visual Inspection |

MEMBERSHIP TYPES

PDA welcomes members at all stages in their careers, from students just learning the industry, to seasoned professionals with years of experience behind them. To accommodate all who work in the industry, we offer several member types. Choose the one that fits your role within the industry or stage in your career. Each type is available in **Essential**, **Plus**, and **Premium** Tiers (see below for specific information on each tier).

Please Make Your Member Type Selection:

- Standard Members** are any individuals working in bio/pharmaceutical manufacturing and related consulting, services, and supplier companies.
- Health Authority Members** are employed full time by a regulatory authority or body. This category of membership excludes government contractors and manufacturers wholly or partly owned by governments.
- Early Career Professional Members** are new to the bio/pharmaceutical manufacturing area, with fewer than five years of professional experience in industry. Applicants must provide one of the following to demonstrate eligibility: a current CV, resume, or social media account showing career history, or a letter from the applicant's corporate HR Department.
- Student Members** are currently enrolled full time at an accredited college or university. This member type is not available to individuals also currently employed in the bio/pharmaceutical industry. Applicants must provide proof of full-time enrollment.
- Academic Members** are full-time faculty members at an accredited college or university. This member type is not available to individuals also currently employed in the bio/pharmaceutical industry. Applicants must provide proof of full-time employment at an accredited academic institution.
- Emerging Economy Members** reside in a country that is not recognized by the World Bank as a High-Income Economy. Refer to the PDA website for the list of qualifying countries to see if you are eligible for this membership type.
- Retired Members** have fully retired from any role in the industry and are not active in consulting.



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TIER SELECTION

Select Your Membership Tier Level:	Essential	Plus	Premium
Standard	<input type="checkbox"/> \$150	<input type="checkbox"/> \$250	<input type="checkbox"/> \$350
Academic, Early Career Professionals, Emerging Economy	<input type="checkbox"/> \$75	<input type="checkbox"/> \$125	<input type="checkbox"/> \$245
Health Authority, Students, Retired	<input type="checkbox"/> Free	<input type="checkbox"/> Free	<input type="checkbox"/> \$175
Membership Directory	●	●	●
Vote in PDA Elections and on Proposed Bylaws Changes	●	●	●
PDA Letter Online	●	●	●
PDA Connect®	●	●	●
PDA Volunteer Opportunities	●	●	●
Members-Only Discounts	●	●	●
PDA Technical Publications Portal – View and annotate the full collection of TRs and PtCs online		●	●
PDA Journal – Limited Access – Current and previous volume year included, earlier articles available for purchase		●	●
Download New TRs/Surveys/PtCs for Free within 30 Days of publication release date			●
PDA Technical Reports – 1 free download of your choice from the existing TR/Survey/PtC library per year			●
PDA Journal – Unlimited Access – All issues in the library are included			●

PRIVACY STATEMENT AND CONSENT

PDA and its affiliated chapters do not rent or sell its mailing lists and will not share your information with anyone without your expressed consent as outlined in our [Privacy Policy](#).

Please provide your consent below:

- I do / I do **NOT** consent to be included in the PDA Membership Directory.
- I do / I do **NOT** consent to sharing my contact information with my local PDA chapter (where applicable).
- I do / I do **NOT** consent to receive periodic promotional emails from PDA and my local chapter (where applicable).

CERTIFICATION AND AGREEMENT

I hereby apply for PDA membership and certify that the statements above are true.

Signature

Date

PAYMENT OPTIONS AND FORM RETURN INSTRUCTIONS:

Indicate your payment method. (See delivery options below)

- A. Credit Card** – Request a pro forma invoice below or visit pda.org/newmember to pay by credit card online.
- B. Check** – Forward the check with the application form: Payable to PDA in US Dollars (\$USD) and payable via a US Bank.
- C. Pro Forma Invoice** – Please email membership@pda.org to request a pro forma invoice from PDA to process payment from your company.

Mail:

PDA
P.O. Box 79465
Baltimore, MD 21279-0465 USA

Express/Overnight Deliveries (DHL, FedEx, UPS, etc):

PDA c/o Truist Bank
Lockbox 79465
1000 Stewart Avenue
Glen Burnie, MD 21061 USA

Additional Assistance:

Tel: US +1 (301) 656-5900
Tel: Europe +49 30 436 55 08-0 or -10
Email: membership@pda.org

Membership is individual based, non-refundable, and non-transferable.

The pricing rates and structure of PDA membership are subject to change – check the PDA website at pda.org/memberprice for current rates.