

# ICAA Membership Application Form

## Intelligent Computing & Automation Association (ICAA)

Membership Number :			Date of Membership	Y/ M/ D		
Applicant Member	<input type="checkbox"/> Category A Member <input type="checkbox"/> Category B Member <input type="checkbox"/> Category C Member <input type="checkbox"/> Category D Member					
Company Name	CH		Business Commencement Date	Y/ M/ D		
	EN		UBN			
Contact Address	CN	Postal Code ( )	TEL			
	EN		FAX			
Invoice Address	Postal Code ( )		Paid-in capital			
			Registered capital			
Email			http://			
Responsible Person	CH		Association Contact Person	CH		
	EN			EN		
Member	CH	1.	2.	3.		
Representative	EN					
Branding		CH :	EN :			
Nature of Business		<input type="checkbox"/> Export Business <input type="checkbox"/> Domestic Sales <input type="checkbox"/> Manufacturing _____ <input type="checkbox"/> Distributor _____ <input type="checkbox"/> Retail Store <input type="checkbox"/> Branch Office <input type="checkbox"/> Others _____				
Business Scope <b>Main Products</b>						
<b>To Whom It May Concern,</b> <p>We hereby apply for membership in accordance with the Articles of Association of your esteemed organization.</p> <p>We sincerely pledge to abide by the constitution and all related regulations as stipulated by the Association.</p> <p>Attached please find the résumé of our company's responsible person and designated member representative</p>						

# **ICAA Membership Application Form**

## **Intelligent Computing & Automation Association (ICAA)**

for your review.

We respectfully request your kind consideration and approval of our membership at your earliest convenience.

Sincerely,

**Intelligent Computing & Automation Association (ICAA)**

Applicant Company Name

( Official Seal )

Responsible Person

( Official Seal )

Form Filler

ext

Date :      Y      M      D

# **ICAA Membership Application Form**

## **Intelligent Computing & Automation Association (ICAA)**

## Resume of Company Responsible Person and Member Representative

2. Member Representative	1. Member Representative	Responsible Person	
			Name
			Title
			E-mail
			Phone
			Cell
			Date of Membership (Y/M/D)
5. Member Representative	4. Member Representative	3. Member Representative	
			Name
			Title
			E-mail
			Phone
			Cell
			Date of Membership (Y/M/D)

## Notes

1. For group members, please appoint a representative in accordance with the Association's Articles of Incorporation. **Individual and sponsoring members** should designate **one member representative**; in such cases, the résumé of the responsible person is not required. Each member representative shall have the **right to speak, vote, elect, be elected, and propose a recall, except for sponsoring members**, who do not possess these rights. **The member representative** must be either the **company's responsible person, manager, or current employee**, and must be at least **20 years of age**.
2. Individuals with the following disqualifications, as stated in Article 11 of the Association's Charter, **may not serve as a member representative**:
  1. Those convicted of a crime and currently serving a sentence.
  2. Those deprived of civil rights and not yet reinstated.
  3. Those declared under guardianship and not yet released.
  4. Those declared bankrupt and not yet discharged.
3. Individuals with the following disqualifications, as stated in Article 11 of the Association's Charter, **may not serve as a member representative**:
  1. Those convicted of a crime and currently serving a sentence.
  2. Those deprived of civil rights and not yet reinstated.
  3. Those declared under guardianship and not yet released.
  4. Those declared bankrupt and not yet discharged.
4. Those declared bankrupt and not yet discharged.

# ICAA Membership Application Form

## Intelligent Computing & Automation Association (ICAA)

Industry Category Survey Form for ICAA Member Companies	
1. Company Category	
2. Smart City Related – Core Products and Services	
3. Types of Projects Your Company Intends to Participate In	<input type="checkbox"/> Daily Life Aspects <input type="checkbox"/> Business Aspects <input type="checkbox"/> Industrial Aspects <input type="checkbox"/> Infrastructure Development Aspects <input type="checkbox"/> Others      (請註明)
4. Based on the above, please briefly describe your company's expected project plans or initiatives in the selected area(s).	(Please provide a description within 200 words)
5. Suggestions for the Association / Alliance	
6. Company LOGO	Image resolution must be 300 dpi or higher. Accepted file formats: JPG, PNG, AI, and PSD.

※※ The information provided in this industry survey form will be used to assign members to appropriate working groups and facilitate cross-industry matchmaking. We appreciate your cooperation.

### Sources of Association Funding:

1. **Membership Admission Fee:**
  - **Category A Member:** NT\$50,000 (or for companies with paid-in capital over NT\$1 billion)
  - **Category B Member:** NT\$30,000 (or for companies with paid-in capital over NT\$500 million)
  - **Category C Member:** NT\$20,000 (or for companies with paid-in capital over NT\$100 million)
  - **Category D Member:** NT\$10,000 (for companies with paid-in capital under NT\$5 million or academic institutions only)
2. **Annual Membership Fee:**
  - **Category A Member:** NT\$50,000 (or for companies with paid-in capital over NT\$1 billion)
  - **Category B Member:** NT\$30,000 (or for companies with paid-in capital over NT\$500 million)
  - **Category C Member:** NT\$20,000 (or for companies with paid-in capital over NT\$100 million)
  - **Category D Member:** NT\$10,000 (for companies with paid-in capital under NT\$5 million or academic institutions only)
3. **Number of Member Representatives Permitted:**
  - **Category A Member:** 5 representatives
  - **Category B Member:** 3 representatives
  - **Category C Member:** 2 representatives
  - **Category D Member:** 1 representative