



IVS Membership Application Form: **Technology Development Center**

Tech. Devel. Center Name:

Parent/funding Organization:

Primary Technical Contact:

Administrative Contact:

Contact Information:

Motivation:

Development Interests:

- Supported Functions:** ☐ Investigate new equipment and approaches
- ☐ Develop, test, and document new hardware, firmware, and software for operations
- ☐ Assist with deployment, installation, and training for any new approved technology
- ☐ Maintain and support operational equipment

Other information:

The form should be signed by an official committing the organization(s) to participate in the IVS as a Technology Development Center and agreeing to work closely with the IVS Technology Coordinator.

For the organization(s):

Name:

Date:

Name:

Date: