



CYBERSECURITY CREDENTIALS COLLABORATIVE (C3)

C3 MEMBERSHIP APPLICATION

ORGANIZATION INFORMATION

Organization Name: _____

Organization Address: _____

Organization website: _____

CONTACT INFORMATION

Individual's Name and Title: _____

Email address: _____

Phone number: _____

PLEASE CHOOSE ONE OF THE FOLLOWING:

Voting Member - Annual Dues US \$4,000

In order to be a voting member, the applicant organization must have a vendor neutral, ISO/ANSI/IEC 17024 accredited credential within either the information security, privacy or related IT field.

List your organization's credentials that meet the above criteria:

Associate Member - Annual Dues US \$3,000

In order to be a Associate Member, the applicant organization must be materially participating in the information security, privacy or related IT field.

Please describe your organization's participation in the information security, privacy or related IT field:

I, _____ (individual's name), representing _____
(name of organization) agree to the C3 code of ethics available at www.cybersecuritycc.org.

Please email a scanned copy of this completed application to members@cybersecuritycc.org.

Membership requires C3 Board approval of your application. You will be contacted after Board review of your application. Upon application approval, you will be invoiced for the annual dues.

Signature: _____ Date: _____

C3 Member Benefits: Participation with other organizations dedicated to providing awareness of and advocacy for vendor neutral credentialing in information security, privacy and related IT disciplines as well as to advance the craft of practice of certification program development and to provide a forum to collaborate on matters of shared concern.

Internal Use Only:

Approved:

Date: