ODPi Egeria Conformance Program
Participation Form

Complete this form for each Participant (e.g., company or other entity) that desires to participate in the ODPi Egeria Conformance Program and to use the Conformance Marks. The Project Word Mark and the Conformance Marks are trademarks of ODPi, Inc. Capitalized terms used herein and not otherwise defined shall have the same meanings set forth in the Program Terms.

By signing below and submitting this form to ODPi, Inc. (by email to odpi-project-egeria-conformance@lists.odpi.org or other method made available by ODPi, Inc.):

1. The Participant agrees to the Terms and Conditions of the ODPi Egeria Conformance Program (the “Program Terms”), available at http://odpi.org/egeria-toc
2. The Participant confirms that the products and services identified below as Qualifying Offerings either (a) have passed all of the tests described in the Certification Guide, and are Qualifying Offerings under the Program Terms; or (b) prior to usage of the Conformance Marks, will pass all of the tests described in the Certification Guide, and will be Qualifying Offerings under the Program Terms.
3. The Participant confirms that it has submitted, or will submit, to ODPi, Inc. the results of the tests prior to its first public use of the Conformance Marks associated with the corresponding version of the ODPi Egeria tests.
4. The Participant confirms that it will either (a) maintain conformance of the Qualifying Offerings with the ODPi Egeria tests, or (b) cease use of the Conformance Marks if the products or services cease to be Qualifying Offerings.
5. The Participant confirms that it will promptly submit an updated Participant Form to ODPi, Inc. prior to using the Conformance Marks with Qualifying Offerings not listed here.
6. I confirm that I am authorized to make the above statements and to submit this form on behalf of the Participant.

Participant Information

Company / entity name: ______________________________________________________
Contact address: ___________________________________________________________
Contact telephone: __________________________________________________________
Contact email: _____________________________________________________________

Select one: [ ] Participant is a member of ODPi, Inc.
[ ] Participant is a non-profit organization.
[ ] Neither of the above. Please contact ODPi, Inc. to discuss fees for participation in the Conformance Program.
Qualifying Offerings

Name, brief description and URLs for more information:

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Conformance Details

Initial Version of ODPI Egeria Conformance Program tests for Conformance: _______

Conformance Date: ____________________

Signed on behalf of Participant by:

__________________________________
Name: ______________________________
Title: ______________________________
Date: ______________________________