



THE  
Water  
Research  
FOUNDATION

Date \_\_\_\_\_

Fiscal Year End \_\_\_\_\_

## 2024 CONSULTANT SUBSCRIPTION PROGRAM

\_\_\_\_\_ Water-related Billings (million \$)\* Per Year      × \$2,809.86=      \$ \_\_\_\_\_

\*The amount your company has billed clients for "water related" products/services for the year (million \$)

Minimum Payment: \$2,445 • Maximum Payment: \$65,333

### Preferred Payment Schedule

Annual       Quarterly       Semi-annual       Requesting Revised Invoice

### Organization Information

\_\_\_\_\_  
First Name, Last Name (person completing worksheet)      Title

\_\_\_\_\_  
Organization Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City      State      Zip Code

\_\_\_\_\_  
Email      Phone

**Submit Online:** Save and email your completed form to Bennett Parsons (see below)

**Mail:** The Water Research Foundation

ATTN: Subscriber Services

6666 West Quincy Avenue, Denver, CO 80235-3098

**Contact:** Bennett Parsons, kbennett@waterrf.org, 303.347.6101

