

Application for **ONLINE MEMBERSHIP**

Name of Site

Street Address

Mailing Address (if different than street address)

City/State

City/State

Zip

Zip

Telephone

Fax

Website

Date Established

Weekly Site Update Frequency

Site visitors per week

Circulation

Audited By

Key Personnel:

Publisher

Email:

Advertising Director

Email:

Editor

Email:

Please submit the following with your application:

- Current advertising rate card
- Your site URL or printed copy of home page
- Payment for one year's dues

Dues: Online Membership dues
are \$425 per year.

Submitted by: _____ Date: _____

Office Use Only: Approval of Membership _____ Check Rec'd: _____

Executive Director Signature: _____