



Virginia Press
Association

4860 Cox Rd., Suite 150
Glen Allen, VA 23060
(804) 521-7570
www.vpa.net

Application for **INDIVIDUAL & FREELANCE MEMBERSHIP**

Full Name:

Mailing Address

City/State

Zip

Telephone

Email:

List which Virginia publications you have been previously employed (if applicable)

List which Virginia publications you have produced work for in the last year

Briefly describe why you want to join the VPA:

Dues: Individual and Freelance members dues are \$75 annually. Please submit one year's dues with application.

Submitted by: _____ Date: _____

Website Address (if applicable): _____

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

Executive Director Signature: _____