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AFFILIATE MEMBER APPLICATION

I (we) here by apply for Affiliate Membership in the Pennsylvania NewsMedia Association, subject to confirmation by the PNA Board of Directors and Members. Affiliate membership applications are accepted from any individual, company or organization that furnishes machinery, equipment, supplies, or services to the news media industry. Affiliate members are entitled to an assortment of privileges with the Association (with the exceptions of voting and holding office), including receipt of our weekly e-newsletter, Headlines & Deadlines, invitations to attend PNA's annual events and tradeshow, and opportunities to promote your organization to PNA members. This is a continuing membership to run consecutively from year to year without the necessity of a yearly renewal. An affiliate member may withdraw from the Association by presenting PNA a written statement or resignation. Membership privileges in PNA may be withdrawn as set forth in the bylaws.

Date: _____ Year Company was Established: _____

Name of Applicant: _____ Title: _____

Company: _____

Company Address: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: _____ Fax: _____

Website: _____ Email: _____

Describe the nature of your business or profession and the product or service your company sells to newspapers: _____

List three Pennsylvania newspapers that you currently work with or sell your product(s) to:

1. _____ 2. _____ 3. _____

Membership Type: For-profit firm, corporation or organization Non-profit firm, corporation or organization

**ANNUAL DUES
\$400**

Please return the completed application form and a one-time-only application fee of \$25, which is non-refundable, to the PNA office, keeping a duplicate copy for your records. Upon membership acceptance, the \$25 fee will be credited toward your dues. Please include 3 promotional brochures or information sheets describing your company and its goods and services. Thank you for applying for membership. Please return this completed form to the address below.

Authorized Signature _____ Print Name _____

For questions, contact Kathleen Landis at (717) 703-3069 or KathleenL@pa-news.org.