

Melrose, Mass. Television, Inc. (MMTV)

Annual Membership Application

Name: _____ Date: _____

(if joining as an organization)

Name of Organization: _____ Your title: _____

Address: _____

Home Phone: _____ Work Phone: _____

CATEGORY

_____ Individual Access Member	\$25
_____ Student/Senior (under 18, over 65)	\$15
_____ Family	\$40
_____ Organization	\$100

(An organizational membership allows any number of the group's members to participate on productions, but only on behalf of the organization they represent. To participate in other access productions, you must join as an individual, student/senior or family.)

Please answer the questions below so that we may better serve your video needs and interests -

Are you interested in producing your own shows or working on other producers' shows:

What kinds of programs most interest you (sports, public affairs, arts, social, etc.):

What aspects of video production are you interested in learning (producing, directing, editing, camcorder, sound, lighting, graphics, etc):

Please list any prior video production experience or training you have had:

Signature: _____ **Date of birth (if under 18)** _____

If under 18, responsible adult must sign: _____

Relationship to applicant: _____

Send payments and inquiries to: Melrose, Mass. Television
360 Main St. **Tel. 665-MMTV**
Melrose, MA 02176

Staff approval _____ Date: _____ Agreement with Policies signed _____