MEDIA MEMBERSHIP FORM

Organization: _______________________________________________________________

Address: ___________________________________________________________________

City, State, Zip: ______________________________________________________________

Phone: ________________________________  Fax_________________________________

Web address: _______________________________________________________________

Main Contact: ____________________________________________________________

Title: ___________________________________________________________________

Direct Phone: __________________________  Direct Fax: ________________________

Email: __________________________________________________________________

Dues:  Annual dues are based upon revenue for most Media Members:

Over $1 Billion......................... $7,500
$150 Million to $1 Billion .................. $4,000
Under $150 Million ......................... $2,500
Insurance industry members ............ $4,000
International members .................... $2,500
Press Associations........................ $ 350

Not-for-profit annual membership dues are based upon budget:

Under $1 Million ......................... $500
$1 Million to $10 Million ................. $800
Over $10 Million .......................... $2,000

For further information please contact George Freeman, at 212-337-0200 ext. 206 or gfreeman@medialaw.org.

Signature: ______________________________

Date: ________________________________

Membership dues enclosed: $______________________

Please make check payable to Media Law Resource Center, Inc. and mail to:

Media Law Resource Center, Inc.
c/o Elizabeth Zimmermann
101 Edmund Stree
Lynbrook, NY 11563
List below any individuals that should be added to your firm/organization’s roster in the MLRC database and given website access (attorneys only – no support staff). Please check the boxes to the right of each name listed to have them added to the appropriate email lists.

You must print or type all information clearly.

Firm/Organization: __________________________

Name: ________________________________________ ☐ Email MediaLawDaily
Office Location: _______________________________ ☐ Email MediaLawLetter
E-mail address: ________________________________ ☐ Email MLRC Bulletin

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Return this form to:
Media Law Resource Center, Inc.
c/o Elizabeth Zimmermann
101 Edmund Street
Lynbrook, NY 11563

Phone: 212-337-0200       Fax: 212-337-9893