



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