

Membership Application



Thank you for your interest in becoming a member of CMAC. Your membership provides support to ensure the continued availability of vital community media resources in our local area. Your support is greatly appreciated!

Your Name: (PLEASE PRINT) _____

Address: _____ City: _____ Zip Code: _____

Email Address: _____ Phone: _____

Organization: (IF APPLICABLE) _____

#	Level	Cost	Description
	INDIVIDUAL	\$50	Provides access to training workshops and use of production studio and field equipment (upon certification). Allows submission of programming content for CMAC video channels.
	STUDENT	\$25	All benefits listed above. Open to those currently enrolled in educational institutions or programs (K-12, college, or other professional school).
	NON-PROFIT	\$250	Includes three (3) individual memberships and all benefits listed above.

NOTE: Membership valid for 12 months. Eligibility requires residency or employment in City of Fresno or City of Clovis or employment by organization providing direct services to Fresno/Clovis. Management reserves right to request proof of eligibility.

How did you hear about CMAC? _____

PAYMENT AND / OR DONATION TYPE

Cash \$ _____ Check \$ _____ Credit / Debit Card \$ _____

Check here if you would like to give a donation to support CMAC. Amount \$ _____

Your Signature: _____

Date: _____

Checks payable to:

New Member: Renewal:

Community Media
Access Collaborative
1555 Van Ness Ave.
Fresno, CA 93721