



MEMBERSHIP RENEWAL INVOICE

SMPTE

OFFICE USE ONLY

595 W. Hartsdale Avenue, White Plains, NY 10607-1824

Tel: (914) 761-1100 • Fax: (914) 761-3115

E-Mail: member@smpte.org Web Site: http://www.smpte.org

Member Name: _____

Membership No.: _____

- ACTIVE (One Year)..... \$95.00
- ACTIVE (Three Years)..... \$285.00
- FELLOW (One Year)..... \$95.00
- FELLOW (Three Years)..... \$285.00
- STUDENT (One Year)..... \$25.00
- LIFE MEMBER/LIFE FELLOW.....\$15.00 (For Journal)

SMPTE Job Classification

Please check one category in each column that best describes what you do

Job Function

- 01 Management
- 02 Engineering/Technical
- 03 Production
- 04 Post-Production
- 05 Consultant
- 06 Sales/Marketing
- 07 Educator
- 08 Other (specify) _____

Business Category

- 09 TV Station/Network
- 10 Non-broadcast TV (cable, industrial, etc.)
- 11 Production Facility
- 12 Post-Production Facility
- 13 Manufacturer, Dealer, Distributor, Rental House
- 14 Educational Institution, Gov't, Research Facility
- 15 Satellites, Telecommunications
- 16 Computers, Multimedia
- 17 Other (specify) _____

Payment Method

Check Visa MC Amex Wire Transfer Card # _____ Expiration Date _____

Amount: \$ _____ Signature _____

Address Correction

Please print change of address, employment, title, etc.

Membership No. _____ Date of Birth _____

Member Name _____

Company (if part of address) _____

Company _____

Job Title _____

Address _____

Address _____

City _____ State _____ Zip _____

County _____ Postal Code _____

Bus. Tel.(_____) _____ Ext. _____

Fax: (_____) _____

E-Mail: _____

Job Classification

Please choose one Job Function and one Business Category that best describes what you do.

Job Function Business Category *See Above*

Student Member Only

Name of School: _____

Expected Graduation Date: _____

PLEASE RETURN TOP PORTION WITH YOUR PAYMENT



SMPTE Membership Renewal
595 W. Hartsdale Avenue, White Plains, NY 10607
Tel.: 914-761-1100 • Fax: 914-761-3115



PAYMENT METHOD:

Check Visa MC Amex Wire Transfer
Amount Paid \$ _____ Date Paid _____

Make Check payable to **SMPTE** and return with top portion.
Payment must be in U.S. Dollars drawn on a U.S. Bank.

KEEP THIS PORTION FOR YOUR RECORDS