



Office Use Only

MEMBERSHIP APPLICATION

I wish to join SMPTE as a new (check one)

- Active Member**
\$125.00 as of 01-01-01
- Three Years**
\$375.00
- Student Member**
\$25.00

Note: \$25.00 of dues is allocated for your subscription to the SMPTE Journal and is non-deductible.

SMPTE JOB CLASSIFICATION

Please check one category in each section 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)

I hereby make application for SMPTE membership and agree to be governed by the Society's Constitution and Bylaws.

Signature

Date

PERSONAL INFORMATION

First Name Middle Last

Street Address

City State Zip/Country

Phone Fax

e-mail Date of Birth

Please send the SMPTE Journal to my Home Office

Please send annual invoice to my Home Office Do not sell my name/address

What is your primary reason for joining SMPTE?

PROFESSIONAL INFORMATION

Company Name Title

Street Address Mail Stop or Postal Code

City State Postal/Country

e-mail Web URL

STUDENT MEMBERS

Note: Students must transfer to Active Membership upon graduation. Maximum number of years as student member is six.

Name of School Date of Anticipated Graduation

Name of Faculty Advisor Faculty Advisor Tel. No.

If recruited by a SMPTE Member, please provide recruiter's name:

Recruiter's Name Membership #

PAYMENT METHOD

VISA MC Amex Check (payable to SMPTE)

Card No. Exp. Date Signature

Name on card

Return with payment to: SMPTE Membership Dept.
595 West Hartsdale Ave.
White Plains, NY 10607

Tel: (914) 761-1100
Fax: (914) 761-3115
www.smpte.org