



TELEVISION ACCESS PARTNERS TV
MEMBERSHIP APPLICATION
 646 North H Street, Lompoc, California 93436
 www.cityoflompoc.com/taptv
 (805) 735-8193



Annual Membership Type (check one): Individual Organization

If applying for an INDIVIDUAL membership, please complete this section:

Name _____

Address _____

Home Phone _____ Cell Phone _____

E-mail _____

Do you have prior experience in television production? Yes No

If yes, describe your TV production experience: _____

What are your goals at TAP TV? _____

Do you want to be on the Volunteer List? Yes No If yes, what positions? _____

If applying for an ORGANIZATION membership, please complete this section:

Name of Organization _____

Address _____

Name of representative, agent, or officer _____

Phone _____ E-mail _____

Annual Fees (check one):

- Individual residing in City of Lompoc or City of Santa Maria: \$25
- Individual residing outside Lompoc or Santa Maria: \$60
- Nonprofit or institution based in Lompoc or Santa Maria: \$75
- Nonprofit or institution based outside Lompoc or Santa Maria: \$125

If paying by check, please make check payable to: **TAP TV Lompoc**

Member Signature _____ **Date** _____

For TAP TV Staff Use only:

Membership can only be approved AFTER the person applying has signed TAP TV Policies and Procedures and the Channel Use Agreement. When this has been done, CHECK HERE:

Amount of membership fee paid: \$25 \$60 \$75 \$125 *Membership is valid for one year*

Receipt issued by (TAP TV staff initials): _____ Date membership approved: _____ / _____ / _____