

Membership Application and Renewal Form



Thanks for your interest in becoming a member or renewing your membership with CMAP. Your membership dollars allow our non-profit community TV station to offer low or no cost video classes to residents, and keep local programming on the four cable channels in Gilroy, Hollister, and San Juan Bautista. Your continued support is greatly appreciated!

Your Name: (PLEASE PRINT) _____

Address: _____ City: _____ Zip Code: _____

Email Address: _____ Cell Phone: _____

Business Phone: _____ Home Phone: _____

New Membership / Renewal Start Date: _____ End Date: _____

✓	Membership Level	Cost	Membership Aspects
	RED	\$50	Basic video workshops, access to equipment, voting in elections, and the quarterly newsletter...
	GREEN	\$75	... plus acknowledgement in our newsletter
	BLUE	\$100	... plus acknowledgement in our annual report
	GOLD	\$500	... plus CMAP promo item
	STUDENT / SENIOR (55+)	\$40	Same as RED Membership
	FAMILY	\$75	Basic video workshops and access to equipment for up to five immediate family members, one vote in elections, CMAP newsletter
	ORGANIZATION /GROUP	\$100	Annual Membership for three people, one vote in elections, all basic workshops, acknowledgement in our newsletter, text underwriting spot on Channel 20.
	BUSINESS	\$200	Annual Membership for three people, one vote in elections, all basic workshops, acknowledgement in our newsletter, text underwriting spot on Channel 20.
	NON-RESIDENT	\$60	Basic video workshops, access to equipment in order to assist CMAP members in producing programs, CMAP newsletter.
	SCHOLARSHIP	\$0	<i>Available to qualified residents only.</i> Membership in exchange for 5 hours of volunteer work per quarter (20 hours a year). Includes all aspects of Red Membership.
	GOVERNMENT USER	\$0	<i>Available only to employees of the cities of Gilroy, Hollister and San Juan Bautista to make a video for the government channel.</i> Membership includes basic video workshops, access to equipment, CMAP newsletter.
	EDUCATIONAL USER	\$0	<i>Available to students or staff from Gilroy, Hollister and San Juan Bautista schools that are required to make a video for the educational Channel 19.</i> Membership includes basic video workshops, access to equipment, CMAP newsletter.

CMAP WOULD LIKE TO KNOW...

How did you hear about CMAP? _____

Are you interested in volunteering for CMAP? Yes Not at this time

What's your occupation: _____ Place of Employment: _____

ORGANIZATION (Complete ONLY if your membership is through an Organization)

Name of Organization: _____

Type: Business Government Non-Profit Press Religious School

Address: _____ Main Number: _____

Website: _____ Fax Number: _____

Your Position in the organization: _____

MEMBERSHIP PAYMENT TYPE AND/OR DONATION TYPE

Cash \$ _____ Check \$ _____ Credit Card \$ _____

Check here if you would like to give a donation to support CMAP's projects with youth media and non-profit organizations. Amount: _____

CREDIT CARD MEMBERSHIP/DONATION PAYMENT (Complete ONLY if paying or donating using a credit card)

Name on Credit Card: (PLEASE PRINT) _____

Credit Card Number: _____

Type: Visa Master Card American Express Discover

Expiration Date: _____ * CSC: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ E-mail: _____

** Note: CSC is the last 3 digits in the signature area on the back of your Visa, Master or Discover card. For American Express, is the 4 digits in the front of the card.*

AUTHORIZED SIGNATURE (SIGN ONLY if paying a membership or donating using a credit card)

With this signature I authorize CMAP to use my credit card information provided above in means of a payment for membership and/or donation in the amount of \$ _____.

Your Signature

Your Name (Please Print)

CMAP "Your community media center"
• City View 17 • Gavilan TV 18 • ED TV 19 • Public Access 20

Gilroy, Hollister and San Juan Bautista