

Membership Form



PACTV offers several membership options for community members:

- Membership to create a television show or video for the PACTV Community Channel
- Free membership for nonprofit, local officials, municipal employees and students involved in our Educational programs in Kingston and Pembroke.

Please select your membership type and return your completed form and membership fee, if applicable, to the Director of Community Media.

All information will be entered into our database. Please note, each member must have an email address associated with their membership.

We hope you'll sign up for our E-Newsletter and attend member events. Welcome to PACTV!

Memberships for Producers, Crew and Volunteers (includes FREE basic classes)

- Individual \$30 Senior \$15 (62+) Youth \$15 (11-13)* Youth \$15 (14-17)
- Family \$60 (Up to 4 members) Business \$100 (Up to 4 members)
- Nonprofit Group \$50 (Up to 4 members)

Free Memberships for Nonprofits, Municipalities and Elected Officials (NO Classes)

- NonProfit Organization (PSA Day)
- Town, County or State Official or Employees
Your Position _____

Free Education Channel Memberships (Free basic classes)

- Kingston Public Schools Pembroke Public Schools

PACTV School Advisor Signature _____

* Members ages 11-13 must be supervised by an adult (parent, guardian or group leader) at all times.

PLEASE PRINT CLEARLY

Today's Date: _____

Name: _____

Street Address: _____

Mailing Address (if different than above with zip code) _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Other Phone: _____

Which do you prefer we contact you with ? _____

E-mail Address: _____ **Date of Birth:** (under 18 only) _____

Email is required for all members (minors please use a parent or guardians email)

Emergency Contact: _____ Phone: _____

What are you interested in?

_____ Producing or Hosting a Show _____ Production Crew _____ Volunteering

_____ Other (Please indicate reason: _____)

Do you want your name and email available to PACTV members seeking crew?

_____ Yes _____ No

Would you like to receive PACTV's E-Newsletter?

_____ Yes _____ No

PACTV Use ONLY

Date Received: _____

Check #: _____

Expiration: _____

In Database: _____

Receipt #: _____

Newsletter: _____