

# Membership Application *PRINTED*

Date \_\_\_\_\_ Frequency (Please check appropriate box): ☐ Daily ☐ Twice-Weekly ☐ Weekly ☐ Bi-Weekly ☐ Monthly

Corporate Name \_\_\_\_\_

Name of Newspaper *(use a separate application for each newspaper)* \_\_\_\_\_

Paid Circulation \_\_\_\_\_ Requestor/Free Circulation \_\_\_\_\_ Digital Circulation \_\_\_\_\_ Type of Audit \_\_\_\_\_

Address \_\_\_\_\_ Non-Profit ☐ Yes ☐ No

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

County \_\_\_\_\_ Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Name of Firm that Prints Your Newspaper(s) \_\_\_\_\_

Address *(for insert delivery)* \_\_\_\_\_ Publication Day(s) \_\_\_\_\_

Contact Name at Printing Firm \_\_\_\_\_ Email or Phone \_\_\_\_\_

## Key Personnel

Publisher \_\_\_\_\_ Email \_\_\_\_\_

Editor \_\_\_\_\_ Email \_\_\_\_\_

Advertising Manager \_\_\_\_\_ Email \_\_\_\_\_

Production Manager \_\_\_\_\_ Email \_\_\_\_\_

## Market Profile *(one paragraph description of your market including metro area, demographics, etc.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Distribution *(please describe the distribution of your newspaper, detailing distribution by mail paid, by mail free, newsstand paid, newsstand free, bulk drop, carrier, etc.)*

\_\_\_\_\_

\_\_\_\_\_

**Dues** Membership dues are billed annually based on total circulation — combined total of paid, requestor, free and digital distribution

## What You Should Enclose with this Application

For **each PAID paper** applying for membership:

1. \$50.00 non-refundable application fee
2. An audit statement or a tearsheet of the U.S. Postal Statement of Ownership, Management and Circulation
3. A copy of U.S. Postal Form 3541
4. 2 copies of one issue of each newspaper
5. Proof of media libel insurance
6. Federal Tax ID # \_\_\_\_\_

For **each FREE paper** applying for membership:

1. \$50.00 non-refundable application fee
2. An audit statement or a sworn statement from publisher (must be notarized)
3. Copies of three consecutive printing invoices from the most recent month
4. 2 copies of one issue of each newspaper
5. Proof of media libel insurance
6. Federal Tax ID # \_\_\_\_\_

**These six items MUST be included before your membership application can be processed.**

***\* Upon the acceptance of your membership application, a digital subscription of your publication must be given to NYPA for the duration of your membership.***

The New York Press Association is committed to ethical practices.

All companies profess business integrity, but the power of newspapers/magazines and the impact newspapers/magazines can have on the lives of our readers, their businesses and their reputations, places special responsibility for following legal and ethical business practices.

Acceptance of membership in NYPA includes acceptance of individual responsibility for following legal and ethical business practices.

The NYPA board of directors reserves the right, at its discretion, to bar from membership or to expel from the Association, any newspaper/magazine company that has committed any act that is contrary to the principles of legal and ethical business practices.

Signature \_\_\_\_\_ Title \_\_\_\_\_

**Return completed application to:**

New York Press Association, 621 Columbia Street Ext., Suite 100, Cohoes, NY 12047 — 518.464.6483 — [www.nynewspapers.com](http://www.nynewspapers.com)