



## Membership Application

### Contact Information

Name	
Company/Station/Label	
Street Address	
City ST ZIP Code	
Work Phone	
E-Mail Address	

### Membership Option I

Please select one of the following eligibility categories with an "X" and circle the appropriate title:

#### Cost - \$75.00

**Category A**

Broadcast Personnel (Radio or Television)

Print Representative  
(National/Regional Publication)

**Category B**

Artist

Promoter

### Membership Option II

#### Cost - \$125.00

Please select one of the following eligibility categories with an "X" and circle the appropriate title:

**Category C** – 1 Representative (Each additional representative \$60.00)

- Record Manufacturer/Label Representative
- Media Owners/Managers
- Wholesalers
- Retailers
- Trade Organization Representative
- Performing Rights Organization Representative

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a member, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

### Payment Options

Make check/money order payable to NCGAG and forward to 7-C Hyde Place, Fayetteville, NC 28306. For additional information contact Ruthie Richardson-Robinson, Executive Assistant to the NCGAG President Arvetra Jones, Jr. @ [ncgagpresident@gmail.com](mailto:ncgagpresident@gmail.com).

TOTAL \$ \_\_\_\_\_

TOTAL# MEMBERSHIPS PURCHASED \_\_\_\_\_