



MEMBERSHIP INFORMATION
 Texas Community Newspaper Association
 1440 W. Bitters Rd., Ste. 2737
 San Antonio, TX. 75248
 Phone (210)590-4402 Toll Free (800)324-4402 Fax (866)822-4920
 Email Address: dick.colvin@gmail.com



Corporate Name _____ Date of Submission

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MM DD YY

Street Address _____ Phone _____

PO Box _____ Fax _____

City _____ State Tx _____ Email _____

ZIP _____ Website www. _____

Publisher/CEO _____ Title _____

Authorized Representative Name _____

Publication Data						
If not enough room please attach note						
Paper Number	PUBLICATION NAME	CITY/AREA SERVED	PAGE SIZE			CIRCULATION <small>(Mail, rack, home thrown, etc.)</small>
1						
2						
3						

Total Publications

Total Editions

Total Circulation

NOTES:

MEMBERSHIP FEE SCHEDULE

Please check the appropriate box

TCNA MEMBER ONLY

We will not publish TEXCAP Ads

\$250 /Year

I understand that as a TCNA member we may sell Texcap ads and earn revenue

TCNA MEMBER/TEXCAP MEMBER

We will publish TEXCAP Ads Each week

\$0 /Year

We Will publish Texcap ads in our publications at no charge to TCNA or Texcap each week on a "Must Run" basis. We understand that we also can sell Texcap ads and will submit tearsheets of published ads that will make us eligible for the rebates program.

OTHER KEY PERSONNEL

	NAME	PHONE	EMAIL	FAX	PUBLICATION NAME	KEY RESPONSIBILITY
1						
2						
3						
4						

In submitting the following information for TCNA membership and service our organization agrees to comply with and maintain the TCNA Code of Ethics and Basic Membership requirements listed in this application. We understand that membership and service will be initiated as soon as this Confirmation is received and processed ... 30-40 days after receipt. Final acceptance and continued service are subject to compliance with TCNA Code of Ethics, bylaws, and policies of TCNA's governing body.

Signature _____

Printed Name _____

Title _____ Date _____

TCNA Acceptance Notes: _____