



**Mid-Atlantic  
Community Papers Association  
ASSOCIATE MEMBER  
MEMBERSHIP APPLICATIONS**

P.O. Box 408, Hamburg, PA 19526 • 1-800-450-6631 • Fax (610) 743-8500

**ASSOCIATE MEMBERSHIP REQUIREMENTS**

Associate Membership in this Association shall be limited to those businesses who can provide services and goods to the publishers of the Mid-Atlantic Community Papers Association. Those associate members with publications who derive at least 75 percent or more of their publication revenue from free-circulation papers, and all of whose free-circulations papers meet the requirements of a regular membership. (See regular membership application for requirements.)

**APPLICATION FOR MEMBERSHIP**

I/We have examined the Membership Requirements and Code of Ethics of the Association, here-by make application for membership in the Mid-Atlantic Community Papers Association, and submit the following information in support of my/our application, together with payment of first-year dues along with 12 copies of literature and back-up materials of my business.

- \$125 for tradeshow/marketing membership
- \$75 for marketing only membership

Legal Name of Firm \_\_\_\_\_ Corp/SS# \_\_\_\_\_

Owner/Parent Corp. \_\_\_\_\_

Street Address \_\_\_\_\_

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

Mailing Address (Complete if different from above)

Street Address \_\_\_\_\_

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

Telephone ( ) - \_\_\_\_\_ Fax No. ( ) - \_\_\_\_\_ Cell ( ) - \_\_\_\_\_

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

Check the online business networks you are a member of:  LinkedIn  Plaxo  Twitter  Facebook

Business References (3):

Name \_\_\_\_\_ Telephone: ( ) - \_\_\_\_\_

Street Address \_\_\_\_\_

Name \_\_\_\_\_ Telephone: ( ) - \_\_\_\_\_

Street Address \_\_\_\_\_

Name \_\_\_\_\_ Telephone: ( ) - \_\_\_\_\_

Street Address \_\_\_\_\_

I hereby apply for membership to the Mid-Atlantic Community Papers Association. I have read and agree to the requirements of membership.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Sponsoring Member Publication (if applicable): \_\_\_\_\_