2008-2009 MEMBERSHIP FORM

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MEDIA INFORMATION

Check One: **[ ] Newspaper** **[ ] Magazine** **[ ] Video Production** **[ ] Newsletter**
[ ] Yearbook **[ ] Broadcast** **[ ] Online Publication**

Title of Media:_____

Frequency of magazine/newspaper publication:_____ Yearbook distribution month: _____

Video Production:_____
Types of productions Production frequency

Online Publication:_____
Web site address

SCHOOL INFORMATION

School:_____

Mailing Address:_____
Street Number or P.O. City Zip

School Phone Number: ( ) _____ Adviser Extension: _____

School Fax Number: ( )_____ E-mail Address:_____

Principal's Name: _____ Principal's E-mail: _____

School Enrollment:_____ Grades:_____ through _____

ADVISER INFORMATION

Adviser Name:_____ Home E-mail:_____

Home Address (for emergencies only):_____
Street Address City Zip

Home Phone: ( )_____ Cell Phone: ( ) _____

Number of Years as Adviser:_____ Years at this School:_____

Other Teaching Assignments:_____

ANNUAL MEMBERSHIP FEE

$110 per publication.
$55 per additional publication until Sept. 30, 2008.

[ ] This is the first publication I am registering for Fall 2008-Spring 2009 OSM Membership.
[ ] I have already registered a publication for Fall 2008-Spring 2009 OSM Membership.

[ ] Address invoices to me. [ ] Address invoices to:_____

_____ _____
PO Number (not required) Adviser signature

PLEASE SUBMIT A SEPARATE MEMBERSHIP FORM FOR EACH MEDIA PROGRAM