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APPLICATION FOR INDIVIDUAL MEMBERSHIP

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Signature: _____ Date: ____

I hereby apply for active membership in the Catholic Press Association of the United States and Canada (CPA). Organization: _____ Job Title: City: ______ 9-Digit Zip Code: _____ How did you hear about the Catholic Press Association? I will be a . . . STAFF MEMBER Criteria: Paid employee of a current Publisher Member. Staff Members receive voting rights. Required to submit a statement from employer to confirm employment status. Please list the Publisher Member to which you are employed: FREELANCE MEMBER Criteria: Actively contributes to editorial, advertising, circulation, business or management of at least one Publisher Member, but is not staff. Freelance Members receive voting rights. Required to submit a statement from Publisher Member to confirm freelance assignments. Please list the Publisher Member(s) to which you contribute: AFFILIATE MEMBER Criteria: Individuals not working for a Publisher Member, but who contribute to or care about the well-being of the Catholic press. This membership class includes parish communicators, diocesan communications personnel, bloggers, students, and members of the secular press. Affiliate members do not receive voting rights. **Bloggers:** Please submit a letter or recommendation from your parish/pastor or bishop indicating your good standing with the Catholic Church. **Bloggers and members of the secular press:** Please list the website where we can review your writing: Parish communicators and diocesan communications personnel: Please name the diocese and, if applicable, the parish to which you belong: