## **Application for Associate Membership**

| Desiring to join in pro  | moting the best interes  | st of the newspaper i   | industry in Texas,  |
|--|--|---|---|
|  | of   |   |   |
| (Name of com   | pany)  | (City and sta   | ate)  |
| hereby applies for Ass<br>with provisions set of<br>Associate membership<br>newspaper supplies<br>agencies, to other rela<br>recognized Texas Univ | forth in the TPA Corporate is extended to firms or services, to commuted newspaper vendor        | nstitution as quote<br>engaged in the sal<br>nercial printing fir     | d in the By-Laws.<br>e or distribution of<br>ms, to advertising |
| the TPA e-Newsletter   | TPA distribution list<br>and all other communectory; be eligible to a<br>es, as long as our affi | to receive the <i>Texa</i> nications; be listed attend all convention | as Press Messenger,<br>as a member in the<br>s and workshops at |
| It is our understanding may be discontinued Association. Annual management   | upon 30 days notice  | in writing by our   |   |
| Our application is made our dues payment of \$   |  |   | and includes  |
| (Signed)   |  | (Title)   |   |
| Payment Method:  | Name on Card   |   |   |
| ☐ Check  | Billing Zip Code of Card:  |   |   |
| ☐ Credit Card  | Card #   |   |   |
| □MasterCard □Visa  | Expiration   |   |   |
| □Discover □Am. Exp.  | Email Address for confirm  | nation  |   |
| Amount Paid \$   |  |   |   |
|  | Cianatura  |   |   |