## **News Media Publication Membership Application**



827 N. Washington Ave. | Lansing, MI 48906 P: (517) 372-2424 | F: (517) 372-2429

<b>v</b>	www.michiganpress.org	
General Contact Information		
Company Name:	Publication Name:	
Street Address:		
City:State: _		
Phone: Fax:	Website	:
Owner/CEO/Exec. Dir./Publisher:		
Editor:	Email:	
Ad Contact:	Email:	
Print Publication Information		
When was your first publication date?:		
What is your frequency?:		
Do you have a list of paid subscribers?: YesNo		
Do you have a periodicals-class postal permit?:Yes No		
Number of Full Time Employees		
Print News Media Publication members must: be published in print at least four times a year and average 25 percent news and editorial content per issue; and have been published without interruption for at least one year if it has a bona fide list of paying subscribers.		
Online Publication Information		
When was your start date?:		
Average Monthly Page Views:		
Number of subscribers:		
Average Unique Monthly Visitors:		
Online publication News Media members must: have news published or posted regularly and updated a minimum of every 7 days for the preceding year, maintain at least 25 percent non-advertising locally produced material and abide by intellectual property laws.		
Application Requirements		
Online applicants must provide access to its archives and verifiable traffic/circulation number for the past 90 days and a copy of web hosting agreement. Print applicants must provide proof of circulation and one copy of the last two consecutive issues. Applications will be reviewed by the MPA Membership Committee. Approval will be considered by the MPA Board of Directors.		
Membership dues are determined by the Board of Directors. Members are entitled to all services offered by the organization. Members are eligible to become members of and to appoint Michigan Newspapers, Inc. to serve as a representative for advertising.		
By signing below, you are verifying that the p	ublication listed above me	ets all of the criteria listed above.
Signature of Publisher:		Date:

Please send this form, along with required materials to the:
Michigan Press Association, 827 N. Washington, Lansing, MI 48906
p. 517.372.2424 | michiganpress.org | mpa@michiganpress.org