



MEMBERSHIP APPLICATION

Please complete the following application to become a member of the association. All memberships are active for one (1) year from date of process. Memberships are non-refundable.

Company _____ No. of Employees _____
 Address _____ City _____ State/Province _____
 ZIP/Postal Code _____ Phone _____ Fax _____
 E-mail _____ Web Site _____
 Description of Business _____
 Principal Contact(s) ☐ Mr. ☐ Ms. _____ Title _____

MEMBERSHIP CATEGORIES

COMPANIES

Company dues are based on the company's total U.S. sales volume. Companies in which music, video, video games, computer software, and digital downloads comprise less than 50% of their total annual U.S. sales volume, pay dues based on that segment of their business.

RETAILER

Any business in which a significant portion of total revenue is derived from reselling primarily non-proprietary recorded entertainment products or services to the consumer.

- ☐ Brick & Mortar
☐ Online
☐ Subscription Service

WHOLESALE

☐ One Stop

☐ Rack Jobber

DISTRIBUTOR

☐ Distributor

ENTERTAINMENT SOFTWARE SUPPLIER

- ☐ Record Label
☐ Multimedia Supplier
☐ Video Supplier

SUPPLIER OF RELATED PRODUCTS & SERVICES

- | | |
|---|---|
| <input type="checkbox"/> Accessory Manufacturer | <input type="checkbox"/> Manufacturer's Rep. |
| <input type="checkbox"/> App Developer | <input type="checkbox"/> Marketing/Promotions Co. |
| <input type="checkbox"/> Artist Mgmt. Services | <input type="checkbox"/> Music Discovery Service |
| <input type="checkbox"/> CD Manu./Duplicators | <input type="checkbox"/> Music Publisher |
| <input type="checkbox"/> Computer Software Co. | <input type="checkbox"/> Packaging Company |
| <input type="checkbox"/> Digital Delivery System | <input type="checkbox"/> Prepaid Media Solutions |
| <input type="checkbox"/> Digital Rights Mgmt. Co. | <input type="checkbox"/> Press |
| <input type="checkbox"/> e-Commerce Solutions | <input type="checkbox"/> Printing Company |
| <input type="checkbox"/> Internet/Digital Srv. Provider | <input type="checkbox"/> Research |
| <input type="checkbox"/> Inventory Mgmt. System | <input type="checkbox"/> Web Site Developer |
| <input type="checkbox"/> Listen/Preview Company | <input type="checkbox"/> Other _____ |

INDIVIDUALS

Available only to individuals who are **neither employed nor affiliated with** any Music Biz member company.

☐ PROFESSIONAL

Anyone whose business activity, client or consultative relationship involves him or her with the music retailing community, including, but not limited to, entertainment law; artist management; or the creation, production, manufacturing, promotion, marketing or selling of prerecorded entertainment.

☐ STUDENT & EDUCATOR

Any current full-time college student or educator in an accredited institution of education whose primary area of study or teaching includes the following general disciplines: Music, Business, Marketing, Research or Recording Technology. Membership for students or teachers of disciplines not listed here will be considered individually.

☐ ACADEMIC PARTNERSHIP

Institutions of higher education can become an Association member, providing member benefits for all educators and students in their Music, Business, Marketing, Research or Recording Technology departments.

DUES

Check the box reflecting the appropriate dues category. Total company dues are based on the company's total gross U.S. sales volume.

Company Membership

- ☐ Unfunded Startup\$99
☐ Under \$500K\$225
☐ \$500,001 - \$999,999\$435
☐ \$1 million-\$4,999,999\$1,050
☐ \$5 million-\$24,999,999\$2,225
☐ \$25 million-\$99,999,999\$4,550
☐ \$100 million-\$249,999,999\$7,350
☐ \$250 million-\$499,999,999\$11,200
☐ \$500 million-\$999,999,999\$14,625
☐ \$1 billion-\$2 billion\$26,000
☐ Over \$2 billion\$29,225

INDIVIDUAL MEMBERSHIP

- ☐ Student\$35
☐ Professional\$125
☐ Educator\$125
☐ Academic Partnership\$500

Dues Amount \$ _____

☐ Enclosed is a check in the amount of \$ _____

☐ Charge my credit card in the amount of \$ _____

☐ VISA ☐ MasterCard ☐ American Express

Card Number: _____

Card In Name Of: _____

Expiration Date: _____ V-Code: _____

Cardholder Signature: _____

I hereby apply for membership in the Music Business Association and acknowledge that the information provided is true and factual to the best of my knowledge.

Signature _____

Name _____

Date _____

RETURN TO:

Music Business Association,
 1 Eves Drive, Suite 138, Marlton, NJ 08053

Phone: 856.596.2221 • Fax: 856-596-7299

Email: evelyn.dichter@musicbiz.org

FOR OFFICE USE ONLY

D/R _____ Check # _____

Member # _____ Amount \$ _____