

NATIONAL ETHNIC PRESS AND MEDIA COUNCIL OF CANADA CONSEIL NATIONAL DE LA PRESSE ET MEDIAS ETHNIQUES DU CANADA

MEMBERSHIP APPLICATION / RENEWAL

Surname:	First Name:
Address:	
	Home Tel:
E-mail:	
Citizenship: Canadia	n or other:
Representing Publica	tion or Electronic Media:
Language of Medium	:
Position of Applicant:	
Profession: (if other)	
Years in Journalism:	
Brief professional exp	perience:
Sponsored by:	
I convictions in Canada	do certify and assure the Board that I have no past or outstanding criminal a.
Signature of Applican	t: Date:
Please enclose two co	opies of the last two issues of your publication
For Internal Use Onl	у
Accepted: Yes	No Date of Acceptance:
Signatures of the mer	mbers of the Admission Committee:
1.	2. 3.

Please enclose a cheque of \$50 for the primary applicant, and \$30 for any additional on an annual basis. Please be advised that every medium has only one vote at the general elections.