



NHCCM Membership Application

2017 (January 1 -- December 31)

MEMBERSHIP TYPE (Please Check One)

Make Checks Payable to NHCCM, PO Box 1211, Concord, NH 03302-1211

INDIVIDUAL MEMBERSHIP

\$ 35.00

(Please complete sections 1 & 3 below and answer questionnaire on page 2)

NON-PROFIT / MUNICIPAL (No Access Center)

\$ 50.00

(Please complete sections 1 & 2 below and answer questionnaire on page 2)

ACCESS CENTER MEMBERSHIP

Annual Revenue

Dues (Circle One)

Under \$10,000

\$ 50.00

\$10,001 - \$25,000

\$ 75.00

\$25,001 - \$75,000

\$ 100.00

\$75,001 - \$100,000

\$ 150.00

Over \$100,000

\$ 250.00

(Please complete all sections and answer questionnaire on page 2)

SECTION 1

NAME / MUNICIPALITY / PEG CENTER _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

E-MAIL _____ PHONE _____

SECTION 2

CONTACT PERSON _____

CABLE COMPANY _____ SUBSCRIBERS / HOUSEHOLDS # _____

MUNICIPALITIES SERVED _____ FRANCHISE EXPIRES _____

TOTAL FRANCHISE FEES COLLECTED _____% BREAKDOWN = _____% to PEG TV (if applicable)

CHANNELS OPERATED (Circle All That Apply) **P E G BB1 BB2** _____% to MUNICIPAL BUDGET

SECTION 3

WEBSITE _____ WOULD YOU LIKE A LINK FROM NHCCM.ORG **Yes No**

Do you want to share program files via the NHCCM File Sharing Server? **Yes No**

Continued on next page.....

Please list all paid access staff members (entitled free entry to NHCCM Sponsored Workshops)

NAME: _____ E-MAIL _____

NAME: _____ E-MAIL _____

NAME: _____ E-MAIL _____

NAME: _____ E-MAIL _____

Please list any additional non-staff members you would like added to the NHCCM newsletter mailing list

(Cable Committee Members; Elected Officials; Board Members; Volunteers; Producers, Etc.)

NAME: _____ E-MAIL _____

NAME: _____ E-MAIL _____

NAME: _____ E-MAIL _____

NAME: _____ E-MAIL _____

NAME: _____ E-MAIL _____

NAME: _____ E-MAIL _____

Please use a separate sheet if necessary

NHCCM QUESTIONNAIRE

1. At what time of day would NHCCM meetings work best for you or your staff?

- Morning Afternoon Evening

2. In the last year, how often did you or a staff member attend an NHCCM meeting?

- 0-2 3-4 4-6 7 or more

3. What motivates you to attend an NHCCM meeting?

- Round Table Discussion Networking New Product Updates Technical Information

- Food Training Other _____

4. What is your biggest challenge to attending meetings?

- Time of Day Distance / Location Length of Meeting Nothing of Value Mileage /Travel Costs

5. How could the NHCCM better serve you? _____
