



ASSOCIATE MEMBERSHIP APPLICATION

Annual Dues: \$150.00 (since 1996)

ORGANIZATION NAME: _____

PRIMARY CONTACT: _____

PRIMARY CONTACT TITLE: _____

PRIMARY CONTACT EMAIL ADDRESS: _____

SECONDARY CONTACT AND TITLE: _____

SECONDARY CONTACT TITLE: _____

SECONDARY CONTACT EMAIL ADDRESS: _____

MAILING ADDRESS: _____

CITY, STATE AND ZIP: _____

PHONE: _____

FAX: _____

WEBSITE: _____

TYPE OF ORGANIZATION/PRODUCTS & SERVICES OFFERED:

Nebraska Broadcasters Association

11414 West Center Road, Suite 342, Omaha, NE 68144

402-933-5995 p 402-933-0059 f jim@ne-ba.org