



PROFESSIONAL & STUDENT MEMBERSHIP FORM

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Date: _____
Name: _____
Company/School: _____
Address: _____
City, State, Zip: _____ County: _____
Cell Phone: _____ Email: _____
Website: _____ Twitter Handle: _____

ABOUT YOUR BUSINESS

Business Category (Production, Post-production, Crew, Support Services, Talent, Student): _____
How did you first learn about PAFIA? _____

ANNUAL MEMBERSHIP DUES

JOIN or RENEW

Memberships: \$50 (Professional) \$20 (Student)

METHOD OF PAYMENT – pick one option below (mail, email, phone/fax at top)

Check enclosed (payable to PAFIA) Credit Card: Visa MasterCard Discover AmEx Credit

Card Number: _____ Exp. Date: _____ CVV: _____

Name of Cardholder: _____

Billing Address for Credit Card: _____

Signature: _____

List my name or company name on the PAFIA website Membership Directory for public view. Yes No

I'm interested in volunteering to make membership event phone calls on behalf of PAFIA. Yes No

PAFIA estimates that 38 percent of your membership dues are allocable to lobbying activities of PAFIA, and therefore are not deductible for income tax purposes.

www.pafia.org