

# Santa Barbara Press Club

## Membership application

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

EMPLOYER \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-MAIL \_\_\_\_\_

Qualifications (in relation to membership classification): \_\_\_\_\_

Committees (check all interested in):  Awards  Awards Banquet  Scholarship  Fundraising  Social Events  
 Bylaws  Nominating  Newsletter  High School Journalism Awards  
 Other \_\_\_\_\_

Membership year: January 1 - December 31

Complete membership details on our website: [www.sbpressclub.com](http://www.sbpressclub.com)

New Member  Renewal Membership

Membership type:  Active \$35  Couples \$50  Associate \$35  Retiered \$20  Student \$15  
501(c)(6) business expense

Optional donation of \$\_\_\_\_\_ to the Scholarship Fund 501(c)(3) tax deductible.

\$\_\_\_\_\_ Total enclosed. Please make check payable to: SANTA BARBARA PRESS CLUB

**SANTA BARBARA PRESS CLUB**

126 Powers Ave

Santa Barbara, CA 93103

X \_\_\_\_\_

Date \_\_\_\_\_