

Membership Application

Your Personal Contact Information

First Name

Last Name

E-mail Address

Phone

Home Address

City, State, Zip Code

Report to any publications?

Yes

No

Currently a member of another pool?

Yes

No

What type of membership would you like?

In-town - No shipping

Out-of-town-shipping

Nightclub/Retail/Radio/Website Information

Name of venue you play at?

E-mail Address

Phone

Address

City, State, Zip Code

Owner or Manager's Name

Which nights do you perform?

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

MANDATORY: give us your Top 10 songs right now!

And finally, why do you want to be a member of Northwest Dance Music?

Review your answers CAREFULLY! By pressing the button below, you certify that the facts given are true and complete and that you authorize us to verify this information. If you are accepted you have 7 days to contact us to make final arraignments or you will have to resubmit an application at a later date. You also agree to abide by all the rules of the organization, submit playlists and feedback in a timely fashion and to pay your dues by the 1st of every month. Membership is month to month and you can cancel at any time by sending us a notice by the 20th of any month so you will not be rebilled.