



P.O. Box 82571 • San Diego, CA 92138-2571 • Phone 619-231-4340 • Fax 619-501-9878 • www.sdpressclub.org • sdpressclub@cox.net

MEMBERSHIP INFORMATION FORM

(Membership is on a fiscal year basis – July 1-June 30)

Name: _____ Title/Occupation: _____

Company/Organization: _____

Business mailing address _____

Business phone: _____

Cell Phone/Pager: _____ e-mail: _____

Home address _____

Home phone: _____

Please mark **BOTH** your preferred Mailing and Directory listing:

Mailing address: Home ___ Business ___ **Directory address:** Home ___ Business ___

(Information not published in directory will be considered confidential)

Membership category: _____

- | | |
|---|---------------|
| A Active Media: Primary occupation working press or in direct support of press | \$ 50.00 dues |
| B Public Relations: Public relations or engaged in company or trade publication | \$125.00 dues |
| C Corporate: Group membership for non-media firms (maximum three people) | \$190.00 dues |
| D Associate: Heads of businesses, corporations, politicians and civic organizations | \$190.00 dues |
| E Student: Full-time college students studying journalism or public relations | \$ 15.00 dues |
| F Retired: Persons officially retired and not engaged in any other business | \$ 30.00 dues |

Please mail completed application and check payable to the San Diego Press Club or provide credit card info (VISA or MasterCard only):

Credit card # _____ Exp. Date _____

Signature: _____ Date: _____

I am interested in serving on the following committees:

Headliners ___ Journalism Awards ___ Social Events ___ Membership ___

Legends ___ Affiliate Press Club award judging ___

SDPC Scholarship Foundation donation:

Enclosed is a contribution of: \$10.00 ___ \$25.00 ___ \$50.00 ___ \$ ___ (other)
for the foundation Scholarship Program (**All contributions are tax deductible**)