

UPWIFT

Upstate NY Women in Film & Television

Membership Application

PO Box 741
New Paltz, NY 12561

www.upwift.org

Name _____ Email _____
Company _____
Title _____ Occupation _____
Business Address _____
City _____ State _____ Zip _____
Business Phone _____ Fax _____
Website _____
Home Address _____
City _____ State _____ Zip _____
Home Phone _____ Mobile Phone _____

Membership in UPWIFT is open to professionals with a minimum of 4 years' experience beyond entry level in film, television or new media. If you are joining as a student, you do not need the 4 years' experience. Please attach a resume or bio, with dates, to illustrate your experience level.

IMBD _____

Choose a membership Category:

Regular UPWIFT Membership

Annual Fee \$50

60+ UPWIFT Membership

Annual Fee \$25

Student UPWIFT Membership Annual Fee \$25

- Please attach a copy of your student ID.
- You do not need 4 years of experience for this membership.

Dual Membership with UPWIFT and NYWIFT Annual Fee \$50

- This membership requires separate applications with both UPWIFT and NYWIFT.
- UPWIFT members receive a discount on NYWIFT membership. Go to NYWIFT.org for application and payment information.

Payment Information:

Total Enclosed \$ _____

Credit Card Check (Make checks payable to UPWIFT) PayPal (on UPWIFT Website)

Card Type: _____ Card Number _____
(Master Card, Visa, American Express only)

Name as it appears on Card: _____

Signature: _____

List two professional references who are in film, television, or new media industries, with a minimum of 4 years' experience beyond entry level and with whom you have worked. Note: Please be sure to obtain permission from your references, as they will be contacted. If you have any questions email: membership@upwift.org, or call

Professional Reference #1

Name _____ Email _____
Home Phone _____ Office Phone _____

Professional Reference #2

Name _____ Email _____
Home Phone _____ Office Phone _____

***Please remember to attach your resume or bio.**