

2019/2020 Entertainment Resource & Marketing Association Membership Application

Thank you for your interest in joining ERMA. By filling out the application below and the indicating that you, your company, or agency is involved in the placement of products, services, intellectual property or other tangible items in motion pictures, television shows, webcasts, video games, cellular content, plays, or other entertainment properties. Our membership committee will review your application and respond.

Membership Requirements:

- A cover letter on your company letterhead indicating your desire to join ERMA.
- Company must have been in business for a minimum of one (1) year.
- All Applicants must provide 1 (one) reference from an ERMA member in good standing.
- Agency Members require client verification of representation from 1 (one) retainer client.
- Agency/Corporate Members require 1 (one) studio/production reference written on their letterhead.
- Membership Dues for the first year must accompany this application.

Part 1: Membership Classification:

Agency: ____ Corporate: ____ Studio /Production Co.: ____ Individual: ____ Student: ____ Other: ____

Part 2: Contact information:

Company Name: _____

Contact: _____

Title: _____

Mailing Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

E-Mail: _____

Website: _____

Time in Business: _____

Primary Company Business: _____

Part 3: ERMA Member Reference:

ERMA Member: _____

Contact: _____

Phone: _____

Part 4: Agency Client Reference:

Agencies applying for ERMA Membership must provide a minimum of one (1) retainer client reference.

Client Name: _____

Contact Name: _____

Phone: _____

E-Mail: _____

Website: _____

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Part 5: Agency Production/Studio Reference:

Agencies and Company's/corporations applying for ERMA Membership must provide a minimum of one (1) production, production company or studio reference.

Production Company/Studio Name: _____

Contact Name: _____ Phone: _____

E-Mail: _____ Website: _____

Client Address: _____ City/St/Zip: _____

Length of Relationship: _____ Retainer (Yes/No): _____

Part 6: Dues:

Dues are payable in January of each year in the amount of \$360 or as noted in the ERMA By-Laws. Initial Dues for the 1st year of membership are prorated on a monthly basis as noted below:

- January: \$360 or February – December, prorated on a 12 month basis. If membership application is made in February, dues are (\$30 x current month + 10 remaining months or \$330.00, March (\$30 x 10 months or \$300, etc.)
- Amount Due: \$30 x _____ (Number of months remaining in calendar year) = _____

We hereby agree to abide by the ERMA Code of Ethics and the ERMA By-Laws and other rules or membership requirements as adopted by this organization. We understand the ERMA Board of Directors reserves the right to revoke this membership at any time for cause.

The undersigned hereby gives ERMA permission to contact the clients/references noted in the application above for the sole purpose of verifying membership requirements.

Accepted and Agreed to:

Applicant.

By: _____

Title: _____

Date: _____

Please mail original application with a check made payable to "ERMA" to the following address:

- Michael Schragger, President, ERMA, 73450 Country Club Drive, #46, Palm Desert, CA 92260

Date Received by ERMA: _____ | Check Included ___ Yes ___ No | Ref Verified By: _____

Membership Committee: Date: _____ Approved: ___ Yes ___ No ___ See Notes

Notes: _____