



Belmont Media Center

9 Lexington Street
Belmont, MA 02478
(617) 484-2443
www.belmontmedia.org

Membership Application

PLEASE PRINT

First Name _____ MI ____ Last Name _____

Org /Business _____ Tax ID: _____

Address _____ Apt. # _____

City _____ State _____ Zip _____

Phone (H) _____ (W) _____ Cell _____

E-Mail _____

Other _____

Type of membership – please select one:	
<i>Waiver of membership fee is available upon request</i>	
Student	_____ \$10
Senior	_____ \$10
Individual	_____ \$20
Family	_____ \$25
Non-profit organization	_____ \$35
Business	_____ \$50

Signature _____ Date _____

Signature of Parent (if minor) _____ Date _____

In order to become a member of BMC, a person or organization must provide proof of Belmont residency or corporate or organization address in Belmont or valid Student ID from an accredited educational institution in Belmont.

Memberships are valid for 12 months from the date of joining, and may be renewed annually.

Members may take classes after attending an Orientation to Community Media

Members may check out and use equipment upon completion of classes and certification by BMC staff.

Entered in FACIL by: _____

Date: _____