

NC NATO MEMBERSHIP APPLICATION

We invite you to join us in building a strong, effective and responsive regional NATO organization. Please take the time to complete this short application form, and return it to us with your annual dues payment. We look forward to hearing from you!

CORPORATE NAME: _____

CONTACT PERSON: _____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

THEATRE PHONE: _____ OWNER PHONE: _____

EMAIL: _____

To qualify for membership, the applicant must be either an individual, partnership, corporation, or other business entity engaged in the ownership and/or operation of one or more exhibition facilities.

Theatre Companies: Dues are \$20.00 x _____ (number of screens) = _____ Maximum \$2,000.00

Associate Members (bookers, vendors, etc.): Flat fee of \$50.00

PAYMENT OPTIONS

Make Dues Checks Payable to **NORTH CENTRAL NATO** & mail along with this form to
North Central NATO c/o Dale Haider, 3660 Greensboro Drive, Eagan, MN 55044

----- or -----

Pay with credit card at the North Central NATO website - <https://www.ncnato.org/membership>

Thank you for your support!

Please list each theatre, number of screens and email address. Also list any company personnel to receive general notifications. If need more room use back or attach a separate sheet.

1. _____

2. _____

3. _____

4. _____

5. _____