

**The Global Entertainment Media Arts Foundation
(G.E.M.A. Foundation)**

MEMBERSHIP ENROLLMENT FORM

Membership is based on the calendar year. Dues are paid annually.

Mail form along with appropriate payment to:

The G.E.M.A. Foundation, 2329 Catherine Street, Suite #105, Philadelphia, Pa. 19146

Name: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Cell: _____

Business Name: _____ Business Type: _____

Business Address: _____ City: _____ State: _____

Zip _____ Business Phone: _____ Fax Number: _____

<u>Membership Categories</u>	<u>Membership Fee</u>	<u>Remittance Enclosed</u>
General Membership	\$100	_____
Premier Membership	\$250	_____
Student Membership	\$ 50	_____
Non-Profit Membership	\$350	_____
Elite Membership	\$500	_____
Small Business Partner Membership	\$575	_____
Elite SBP Membership	\$1, 000	_____
Corporate Membership	\$1, 500	_____

Make checks payable to: The G.E.M.A. Foundation – Enclosed is check# _____ in the amount of \$ _____, or use The G.E.M.A. Foundation credit/debit card member authorization form below.

The G.E.M.A. Foundation Credit/Debit Card Authorization Form

Name of Cardholder: _____ Phone: _____

Address of Cardholder: _____

City, State, & Zip: _____

Email Address: _____

Credit Card: Visa MasterCard American Express Discover

Credit Card Number _____ Exp. Date: _____ (month/year)

I authorize G.E.M.A. to charge my credit/debit card in the amount of \$ _____

Signature: _____ Date: _____

Membership Choice _____