



Associate Member Application

Membership Information

Thank you for your interest in becoming a member of the AICP (Association of Independent Commercial Producers). Please fill out the attached application forms and send them along with your dues payment to *David Stewart at National Headquarters: 3 West 18th Street, 5th Floor, New York, NY 10011.* If you require any additional information or have any questions regarding the application process please feel free to contact your local AICP chapter or the National Headquarters office at (212) 929-3000.

Criteria for Membership

Criteria for General: Any firm or corporation regularly engaged in the business of producing television commercials and which employs at least one commercial director shall be eligible to be elected a General Member by the Board upon delivery to the Corporation of an application for membership.

Criteria for Associate Membership: Any person, firm or corporation regularly engaged in the business of providing services or supplies to the television commercial production industry shall be eligible to be elected an Associate Member by the Board upon delivery to the corporation of an application for associate membership.

Criteria for Member-at-Large: The Board of Directors by special resolution may confer membership-at-large upon a Producer located in an area where there is no Local Chapter. A member-at-large shall have the same privileges as a subscribing member under Section 1(c) hereof. Please note: the above companies have the option of joining the closest local chapter in lieu of “at large” status.

Your membership in the AICP entitles you to notices and other communications which the AICP may decide to distribute from time to time to members in general or to your company specifically. By accepting membership in the AICP, you authorize it to communicate with your company via mail, fax, email, telephone, text messaging or any combination thereof and such other mode(s) as the AICP determines.

If accepted into membership the applicant agrees to be bound by the AICP bylaws throughout the term of membership in the AICP.

AICP Chapters

Below is a list of the seven regional AICP chapters, their contacts, and the states that fall into each chapter. If your company *does not* fall into one of these geographical locations you are eligible to join either as a Member-at-Large or with the chapter closest to your company headquarters.

These names are for future contact information; however, no matter where you are located, you should submit your application to our New York office.

AICP/East, 3 West 18th Street, 5th Floor, New York, NY 10011
Contact: David Stewart, Membership Manager, (212) 929-3000
*Connecticut, Delaware, Maine, Maryland, Massachusetts, New Hampshire, New Jersey,
New York, Pennsylvania, Rhode Island, Vermont, Washington D.C.*

AICP/Florida, c/o Shoot Collective, 1920 North Miami Avenue, Miami, FL 33136
Contact: Michael Savitz, Chapter President, (305) 438-9766
Florida

AICP/Midwest, Tessa Films, 106 N. Aberdeen
Chicago, IL 60607
Contact: Lisa Masseur, Chapter President, (312) 757-4389
*Illinois, Indiana, Iowa, Kansas, Michigan, Missouri, Nebraska, North Dakota, Ohio,
South Dakota, Wisconsin*

AICP/Minnesota, c/o Drive Thru Editorial, 510 1st Avenue North, Suite 800,
Minneapolis, MN 55403
Contact: Bob George, Chapter President, (612) 338-4656
Minnesota

AICP/Southeast, c/o BARK-BARK, 730 Peachtree Street NE, Suite 600
Atlanta, GA 30308
Contact: Tabitha Mason-Elliott, Chapter President, (404) 551-4505
*Alabama, Georgia, Kentucky, Mississippi, North Carolina, South Carolina,
Tennessee, Virginia, West Virginia*

AICP/Southwest, c/o Threaded Pictures, 2626 Cole Avenue, Suite 150
Dallas, TX 75204
Contact: Brian Hwang, Chapter President, (214) 954-1998
Arkansas, Louisiana, New Mexico, Oklahoma, Texas

AICP/West, c/o Raleigh Studios, 650 N. Bronson Ave., Suite 223B, Hollywood, CA
90004
Contact: David Stewart, Manager of Membership Information & Systems, (212) 929-
3000
*Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, Oregon,
Utah, Washington, Wyoming*

Associate Membership Dues

The dues for all levels of membership should be determined by the *combined aggregate income of the company and its affiliate divisions based on the previous calendar year*. Income should be based solely on business in the commercial production business. The membership dues levels are explained below. *All dues are paid the first week in January of each calendar year*. Dues are billed annually. Companies joining after the beginning of the calendar year will have their dues pro-rated on a quarterly basis.

Dues Breakdown

Associate Membership (vendors and suppliers)

Please check the applicable box and remit with the corresponding dues, checks made payable to: AICP National Headquarters. Checks should be mailed along with application to David Stewart at National Headquarters, 3 West 18th Street, 5th Floor, New York, NY 10011

CODE	DESCRIPTION	MEMBERSHIP FEE
<input type="checkbox"/> ASSOC1	\$0-\$0.9M	\$500.00*
<input type="checkbox"/> ASSOC2	\$1M & UP	\$1,000.00*

*If joining in April-June, please pay $\frac{3}{4}$ of this amount. If joining in July-September, please pay $\frac{1}{2}$ of this amount; if joining in October-December, please pay $\frac{1}{4}$ this amount.

The AICP is a corporation existing under the not-for-profit law in the State of New York. Your membership dues are not a charitable deduction, but can be deducted as a business expense.

Please consult a tax accountant on this matter.
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AICP Federal Tax I.D. #

The AICP is a not-for-profit organization. Your membership dues are not a charitable deduction, but 95% are considered dues and can be deducted as a business expense. Please note that 5% of your dues will be a direct contribution by your company to the AICP PACs (state and local), unless you designate otherwise*, and this 5% is not membership dues and is not deductible as a business expense.

* Please note that your gross payment remains the same whether you choose to contribute to the AICP PACs or not. The AICP PACs support production-friendly public policy. You may check here if you choose to not make a 5% contribution to the AICP PACs. Please consult a tax accountant if you have further questions on these matters.

Re-instatement of membership

Associate members who allow their dues payments to lapse and then re-join shall incur the following reinstatement penalty in addition to that year's dues:

Amount they would have paid in lapsed dues, plus \$500.

Completed by: I _____ hereby state that the above information is true to the best of my knowledge.

Associate Membership Application
Company Information

Company Name

Company Type

Street Address

City

State

Zip

Telephone

Telefax

email

Website
account (if applicable)

Facebook page (if applicable)

Twitter

Personnel Structure

President/Owner

CFO/Controller

Marketing/Sales Executive

Please provide the following information, if applicable. Should you have more than one additional location or affiliate division please provide information on a separate sheet of paper. (Maximum of 3 additional locations to the main office listed above)

Affiliate Division/Location(s)

Company Name:

President/Owner:

Address:

CFO/Controller:

Marketing/Sales Exec.:

Telephone:

Telefax:

email:

Please list two company representatives to the AICP:

Name

Title

Name

Title

Service Categories: (Please choose no more than *three* - they are for the AICP Directory and can be changed)

- | | |
|----------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Accounting Services | <input type="checkbox"/> Legal Counsel |
| <input type="checkbox"/> Aerial Services | <input type="checkbox"/> Limo Services |
| <input type="checkbox"/> Agents for Film Technicians | <input type="checkbox"/> Location Services/Scouting |
| <input type="checkbox"/> Air Freight, Couriers,
Customs Clearance | <input type="checkbox"/> Messenger Services |
| <input type="checkbox"/> Audio/Visual Equipment | <input type="checkbox"/> Models and Miniatures |
| <input type="checkbox"/> Auto Transport Logistics and Storage | <input type="checkbox"/> Music Services |
| <input type="checkbox"/> Banking Services | <input type="checkbox"/> Payroll Services |
| <input type="checkbox"/> Camera Equipment | <input type="checkbox"/> Production Equipment Rental |
| <input type="checkbox"/> Casting Directors | <input type="checkbox"/> Production Trailers/Motorhomes |
| <input type="checkbox"/> Commercial Representation | <input type="checkbox"/> Prop Rentals |
| <input type="checkbox"/> Communication Equipment Rental | <input type="checkbox"/> Publicity Services |
| <input type="checkbox"/> Computer Software/Services | <input type="checkbox"/> Real Estate (Commercial) |
| <input type="checkbox"/> Dollies, Cranes, and Camera Cars | <input type="checkbox"/> Set Construction/Design |
| <input type="checkbox"/> Executive Production Resources | <input type="checkbox"/> Sound Stages |
| <input type="checkbox"/> Film Commissions | <input type="checkbox"/> Stock Footage |
| <input type="checkbox"/> Film Stock | <input type="checkbox"/> Storyboard Artists |
| <input type="checkbox"/> Foreign Production Services | <input type="checkbox"/> Studio Expendables |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Studio Teachers |
| <input type="checkbox"/> Grip/Electric/Generators | <input type="checkbox"/> Trade Shows |
| <input type="checkbox"/> Hotels | <input type="checkbox"/> Travel Agencies |
| <input type="checkbox"/> Industry References/Guides | <input type="checkbox"/> Van/Truck/Auto Rentals |
| <input type="checkbox"/> Insurance | <input type="checkbox"/> Weather Services |
| <input type="checkbox"/> Labs | |

Please provide us with a description of the type of service your company provides:

(Limit: 500 characters including spaces and punctuation)

Client/Vendor References

Please reference two clients that are AICP General Members (Production Companies) that you do business with on a regular basis:

Company Name

Address

Telephone

Company Name

Address

Telephone

Please provide two vendor references:

Company Name

Address

Telephone

Acct. Dept. Fax:

Company Name

Address

Telephone

Acct. Dept. Fax: