

Southwest Cable Communications Association Membership Application

I hereby apply for _____ ACTIVE
_____ ASSOCIATE (\$225.00/year)

Membership in the Southwest Cable Communications Association and agree, if accepted, to comply with the Bylaws and such rules and regulations as are hereafter adopted.

System or Company Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: () _____

Fax: () _____

E-mail: _____

Name of Parent Company (Active Members only): _____

Name & Title of Person to be put on Mailing List: _____

Date System Began Operations (Active Members only): _____

Number of RGUs (Active Members only): _____

Check Attached for First Month or Period: \$ _____

Date of Application: _____

Company Description: _____

Return application to:
Southwest Cable Communications Association
4350 E. Camelback Rd., Suite G-200
Phoenix, AZ 85018
(602) 955-4122 - Fax #: (602) 955-4505
E-Mail: info@swcable.org