

Mail to: CFAA
PO Box 188093
Sacramento, CA 95818



Email: info@capitalfilmarts.com Web: www.capitalfilmarts.com

CFAA MEMBERSHIP APPLICATION (annual membership = 12 months)

Name _____

Email _____

Phone _____

Mailing _____

Website? _____

Film Affiliation / Title _____

Special skills, equipment, resources _____

Please check one and enclose payment with application:

Individual Membership (\$35) _____

Business Membership (\$100) _____

(includes free admission for up to 4 company reps, link on website, display/distribution of info at CFAA events)

Corporate Sponsorship (\$500) _____

(includes exclusive business partnership, free admission for all company reps to CFAA events, large logo/link on CFAA website, use of CFAA email database for distribution of information and promotion of business and services , display/distribution of info at CFAA events, table/booth space at all CFAA events,

Signed _____ Date _____

Accepted by CFAA _____