



ACADEMY OF TELEVISION ARTS & SCIENCES

ACADEMIC MEMBERSHIP FACULTY APPLICATION

5220 Lankershim Boulevard, North Hollywood, CA 91601 • phone: 818.754.2800 • fax: 818.754.2808

NAME _____

MAILING ADDRESS _____ PHONE _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

PLEASE NOTE: WITH FEW EXCEPTIONS, ALL TELEVISION ACADEMY CORRESPONDENCE IS BY EMAIL.

COLLEGE OR TRADE SCHOOL EMPLOYED BY _____

SCHOOL ADDRESS _____ PHONE _____

CITY _____ STATE _____ ZIP _____

DEPARTMENT _____ CONTACT _____ PHONE _____

You must include a letter on letterhead from the institution where you work with your official title, department, area of expertise and the catalog description of the industry-related course(s) you are currently teaching. Please attach a resume if possible that includes any non-academic television credits for our records. Applications are reviewed by the Educational Programs Committee. Incomplete applications will be returned. You will be notified by mail of the approval status of your application. Processing time is 4-6 weeks.

I certify that I am a member of the faculty at the above institution.

SIGNATURE OF MEMBER _____ DATE _____

FILM GROUP: For an additional \$75 annual fee you may join the Film Group, entitling you and a guest to attend screenings of 60 new motion pictures per year for a total value of over \$1,200. Screenings are held in the Leonard H. Goldenson Theatre in North Hollywood.

Check here for Film Group. (Please include an additional \$75 with your payment).

Dues for one year are \$75.00 plus a one-time processing fee of \$10.00 for a total of 85.00. Checks are to be made payable to ATAS. Payment for membership must be enclosed with this application in order to be processed.

Check enclosed

- VISA
- MasterCard
- AMEX

CARD NUMBER _____ EXP _____

AUTHORIZING SIGNATURE _____