

American Women in Radio & Television Dues Waiver Application

Name: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Phone: _____ Email: _____

I certify that I am:

- an AWRT member whose dues are currently up for renewal and
- currently unemployed and actively seeking employment in the media field and
- not currently working as a consultant.

(All three must be met to qualify for the AWRT dues waiver program.)

I understand that I can participate in the AWRT dues waiver program and have my AWRT dues waived for up to six months. During that six-month period, I understand I will be billed for my dues monthly but can continue the dues waiver by notifying AWRT if my unemployed status remains unchanged.

Upon reemployment, I will notify AWRT immediately and will continue my membership on a paid basis.

Signature

Date