

THE PUBLISHING TRIANGLE
The association of LGBTQ people in publishing
511 Avenue of the Americas, #D-36
New York, NY 10011
www.publishingtriangle.org / publishingtriangle@gmail.com

MEMBERSHIP APPLICATION
(Please Print)

NAME: _____

ADDRESS 1: _____

ADDRESS 2: _____

CITY STATE ZIP: _____

TELEPHONE: PRIMARY _____ SECONDARY (optional) _____

EMAIL: _____

MEMBERSHIP CATEGORY: *Please check one box only*

_____ Individual* **A** (\$40/year; 1 person)

_____ Business** **B** (\$85/year; 1 company)

_____ Family **F** (\$70/year; 2 people/1 address; be sure to list *both* names above)

Total \$ enclosed: \$ _____

From time to time the Publishing Triangle lends its mailing list to other worthy literary or LGBTQ groups. If you do not wish to be included in such mailings, please mark "No" below; if you do not fill this out we will assume you mean "Yes."

_____ Yes _____ No

Mail this form with your check or money order (in US \$ only) to the address shown in our letterhead above. Thank you. (We are sorry, but we do not accept credit cards.)

* *Family or Individual members may change his/her/their associated mail address at any time, even if using a work address. The membership is tied to the person(s).*

** *In filling out data above, please give the company name at "Name"; provide a contact person and/or department at "Address 1," and the company address beside "Address 2." If that contact person leaves the company, the membership remains with the company; it cannot be transferred to the person's home address. (Business membership is valuable for our Literary Awards programming.)*

=====

Publishing Triangle Use Only:

Check Date:

Check No.:

Check Amount:

Exp. Date: