



ARTISTS MUSIC GUILD REQUEST FOR MEMBERSHIP FORM

Name:

Email Address:

Mailing Address:

Phone(s):

Web Page Address:

Are you represented by an agent?

If So, who?

Who referred you to the Guild? (This must be filled out)

What is your talent?

How long have you been in the entertainment industry?

How many commercially released projects do you currently have?

Do you have a publishing catalog?

Do you have distribution?

If so, through whom?

What level of membership are you requesting?

How much of your income is derived from your performances?

Are you a full time artist?



ARTISTS MUSIC GUILD

REQUEST FOR MEMBERSHIP FORM

Please be advised that once you finish the application the Guild membership committee will review your application and will make its final recommendations to the Guild board. Even though you may request a certain level of membership the review committee may find that you do not have enough credits to award you that level. Also, if you are placed in Associate or Entry Level membership, you will automatically be placed into the Guild's Mentorship Program.

Send: Once your application is complete, please fax, scan, or email attach the typed or hand written pages to

- Fax 615-469-5504
- Email info@artistsmusicguild.com with the subject "Membership Application"

Membership dues must be paid at the time of application acceptance.

- Professional Members: \$150.00 per year
- Associate Members: \$120.00 per year
- Entry Members: \$75.00
- Public Members: \$25.00

Payment: AMG accepts all major credit cards, checks, and paypal online. Upon acceptance of your application, the AMG offices will contact you with more information to obtain payment. If your application is incomplete, or denied, no payment is required.

Please sign:

I understand that I am requesting membership into the Artists Music Guild. I understand that the benefits that are afforded to me through my membership are a privilege and may be revoked at any time. I agree to help promote the AMG and understand I have the right to place their logo on my personal webpage or any advertisements to insure people know I am a member. I understand that should the AMG ask me for promotional materials or photos I must comply with those requests within a respectable amount of time. I hereby give the AMG full permission to use my likeness and biographical material for any purposes they deem necessary.

Signature: _____

Date: _____

FOR AMG OFFICE USE ONLY

Approval Date:

Denied Date:

AMG Membership Number

AMG Referral Agent