



Membership Application

MEMBERSHIP REQUIREMENTS

Membership in the Community Papers of Florida is limited to newspapers, shoppers, and other advertising publications that are distributed free of charge on a regular basis. Members must publish network classified ads at no charge, and provide a full copy of each weekly/monthly publication to the CPF office, either in print or electronically. Members may sell classified ads into the network and retain 50% of the revenue.

APPLICANT INFORMATION

Legal Name of Firm _____
 Street Address _____ City, State, ZIP _____
 Mailing Address (if different) _____
 Publisher's Name _____ E-mail _____
 Phone _____ FAX _____ Cell _____
 Ad Contact Person _____ E-mail _____
 Phone _____ Website _____

PUBLICATION DATA

# of Editions	Name of Publication(s)	Circulation Area		Circulation	Open Rate	Type (Shopper or Community News)	Frequency of Publication
		City(s)	County(s)				

List any additional publications on another sheet of paper.

IMPORTANT: Day(s) of Publication: _____ Method of Printing: In-House _____ Central Printer _____
 Method of Distribution: Mail _____ % Hand Delivery _____ % Counter Drop/Racks _____ % = 100% Distribution

MEMBERSHIP LEVEL DESIRED

Level 1
DO Run Network Classifieds & DO Receive Audits

Up to 5,000 circ. – \$250 per year
 5,001 to 15,000 circ. – \$300 per year
 15,000 & up circ. – \$400 per year

Notes:
 • Base rate covers one audit. There is a fee of \$25 for each additional publication to be audited. **Attach a list of additional publications to be audited** (all must run network classifieds). Indicate below how many audits you are adding and the total amount added to the base membership fee: # of papers _____ x \$25 = \$ _____ added to base fee.
 • For operations with multiple publications, the base amount due is based on your largest circulation paper.

Level 2
DO NOT Run Network Classifieds & DO Receive Audits

Up to 5,000 circ. – \$450 per year
 5,001 to 15,000 circ. – \$500 per year
 15,000 & up circ. – \$600 per year

Notes:
 • Base rate covers one audit. There is a fee of \$50 for each additional publication to be audited. **Attach a list of additional publications to be audited.** Indicate below how many audits you are adding and the total amount added to the base membership fee: # of papers _____ x \$50 = \$ _____ added to base fee.
 • For operations with multiple publications, the base amount due is based on your largest circulation paper.

Level 3*
DO Run Network Classifieds & DO NOT Receive Audits

Up to 5,000 circ. – \$100 per year
 5,001 to 15,000 circ. – \$150 per year
 15,001 to 20,000 circ. – \$200 per year
 20,001 & up circ. – \$250 per year

* For operations with multiple publications, the amount due is based on your largest circulation paper.

Level 4*
DO NOT Run Network Classifieds & DO NOT Receive Audits

Up to 5,000 circ. – \$200 per year
 5,001 to 15,000 circ. – \$300 per year
 15,001 to 20,000 circ. – \$350 per year
 20,001 & up circ. – \$400 per year

Return this completed application & the appropriate Membership Level fee to CPF, P.O. Box 1149, Summerfield, FL 34492.

I certify that the membership applied for, if accepted, will be in full compliance with the Membership Requirements set forth above. I understand that membership will be initiated as soon as this application and the appropriate Membership Level fee have been received and acted upon favorably by the Board of Directors. Continuation of membership privileges is subject to compliance with the Membership Requirements and other provisions of the CPF By-Laws.

Firm Name _____
 Authorized Signature _____ Date _____

FOR OFFICE USE ONLY

_____ Phone List _____ Mbr. Pubs./Web _____ ClassAd Brochure _____ Email/Pub List (B) _____ News DB _____ CVC
 _____ Classifieds _____ Web Link _____ Welcome Packet _____ Email/Pub List (D) _____ Mbr. DB _____ INK