# AOTV/WVAO Class Registration

1. **Check box that applies** TV Radio Both

## Name Date

##

## Address

**City, State, Zip Code**

**Home Phone Work Phone Cell Phone**

## Email Address Date of Birth

## How did you hear about AOTV/WVAO?

**List days and times available for workshops**

## Do you have previous film/video or radio experience?

## What type of programming would you like to work on or produce?

**Individual Membership fee required of $30.00 per year or $50.00 for both.
$25.00 per course or $40.00 for both if under 18 or over 65 years of age.**

**In lieu of payment: 8 hours volunteer time per course**

**Annual Fee Paid $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Volunteer Hours \_\_\_\_\_\_\_\_\_\_\_\_**

**Staff Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Return membership form to: **Athol-Orange Community Television, Inc.**

 **163 South Main Street**

##  Athol, Massachusetts 01331