



MEMBERSHIP APPLICATION

ELIGIBILITY FOR MEMBERSHIP: Any reputable person, firm, or association who has been in the business of Personal Management for at least one (1) year; who does not hold a franchise in any of the performing arts trade unions; who does not accept fees from any Artist on the promise of obtaining engagements; and who does not share an office on or within the premises of, or work for, or is in business with any of the following: (A) an attorney; (B) a Certified Public Accountant; (C) any person who holds an agent's franchise from any of the following: A.F. of M., S.A.G., A.G.V.A., A.E.A., A.F.T.R.A., S.E.G., A.G.M.A., plus any and all branches of the Associated Actors and Artistes of America; or (D) any association, ownership, or in business with the following: acting/vocal/modeling/dance school, photographer and/or casting or theatrical booking agency.

MEMBERSHIP APPLICATION: The undersigned Applicant hereby requests to be considered for membership in the National Conference of Personal Managers.

Name:

Phone:

Company:

Fax:

Address:

E-Mail:

How long have you been in Personal Management? _____ Years
Is Personal Management your main source of income? [] YES [] NO

Brief Personal Biography:

Other Business Interests:

What do you believe are the functions of a Personal Manager?

Why do you desire to be considered for membership?

Please list three (3) entertainment industry references:

	NAME	ADDRESS	TELEPHONE
(1)			
(2)			
(3)			

Are you now, or have you ever been, involved in or connected to any entertainment industry litigation? NO YES -- Please explain:

Please list your artist clients, their professions, and agency representation:

If there is more than one personal manager in your firm, please provide name(s) and brief biography:

ARE YOU FRANCHISED BY ANY OF THE PERFORMING ARTS TRADE UNIONS? YES NO
DO YOU SHARE AN OFFICE ON OR WITHIN THE PREMISES OF, OR
WORK FOR, OR ARE YOU IN BUSINESS WITH ANY OF THE FOLLOWING? YES NO
(A) an attorney; (B) a Certified Public Accountant; (C) any person who holds an agent's franchise from any of the following: A.F. of M., S.A.G., A.G.V.A., A.E.A., A.F.T.R.A., S.E.G., A.G.M.A., plus any and all branches of the Associated Actors and Artistes of America; or (D) any association, ownership, or in business with the following: acting/vocal/modeling/dance school, photographer, casting or theatrical booking agency. If either answer is YES, please explain:

It is hereby understood: If any of the foregoing information provided by you is incorrect, the National Conference of Personal Managers has the right to reject your application; If the answers to any of the foregoing questions change during the time your application is being considered, or during your membership period, you must notify the NCOPM National Secretary within five days of such changes by certified mail or overnight courier, return receipt requested. (Failure to do so may constitute mandatory resignation of membership); and if, at any time, there is evidence that incorrect or false information was provided herein, NCOPM shall have the right to terminate your membership and you shall forfeit your Initiation Fee and Dues payments. This application is subject to acceptance by the NCOPM Division Membership Committee and the NCOPM National Board of Officers.

The Initiation Fee of \$350.00 accompanies this application with the first year's annual dues payment:
 ONE MEMBER: \$180.00 TWO MEMBERS: \$300.00 THREE MEMBERS: \$400.00

IF ACCEPTED, THE UNDERSIGNED APPLICANT AGREES TO ABIDE BY ALL RULES, REGULATIONS, BYLAWS AND THE CONSTITUTION OF THE NATIONAL CONFERENCE OF PERSONAL MANAGERS.

APPLICANT'S SIGNATURE _____ DATE _____

**Please mail completed Membership Application with check
For Initiation Fee and Annual Dues (payable to "NCOPM") to:**

NCOPM EASTERN DIVISION
Daniel Abrahamsen - Executive Director
DCA Productions, 676 Ninth Avenue #252
New York, NY 10036

NCOPM WESTERN DIVISION
Candee Barshop - Executive Director
1440 Beaumont Ave., Ste. A2-360
Beaumont, CA 92223