



2020-2021 MEMBERSHIP FORM

OSM
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MEDIA INFORMATION

Check One: Newspaper Magazine Video Production Newsletter
 Yearbook Broadcast Online Media

Title of Publication: _____

Frequency of magazine/newspaper publication: _____ Yearbook distribution month: _____

Video Production: _____
Types of productions Production frequency

Online Media: _____
Web site address

SCHOOL INFORMATION

School: _____

Mailing Address: _____
Street Number or P.O. City Zip

School Phone Number: () _____ Adviser Extension: _____

School Fax Number: () _____ E-mail Address: _____

Principal's Name: _____ Principal's E-mail: _____

High School or Junior High School Enrollment: _____ Grades: _____ through _____

ADVISER INFORMATION

Adviser Name: _____ Home E-mail: _____

Home Address (for emergencies only): _____
Street Address City Zip

Home Phone: () _____ Cell Phone: () _____

Number of Years as Adviser: _____ Years at this School: _____

Other Teaching Assignments: _____

ANNUAL MEMBERSHIP FEE

\$140 per publication. \$70 per additional publication.

This is the first publication I am registering for Fall 2020-Spring 2021 OSM Membership.
 I have already registered a publication for Fall 2020-Spring 2021 OSM Membership.

I am enclosing a check.* Please invoice me. (*checks made out to University of Oklahoma)

Address invoices to me. Address invoices to: _____

PO Number (not required)

Adviser signature
