

Programmer Membership



eligibility

Any person, firm or corporation that, by means other than broadcasting, provides or distributes programming for retransmission by cable systems qualifies for Programmer membership in the NCTA.

dues

Program Network member dues payment to NCTA is based on total gross revenues from direct and indirect U.S. cable sales during the previous year as determined by generally accepted accounting principles (GAAP). Gross cable sales revenues shall include, but not be limited to: operator fees, advertising, guides, sale of programming and products to cable program networks and cable operators; and sale of programming (PPV & VOD) through cable operators to cable subscribers. The only revenues excluded are revenues from separate lines of business not related to the provision of cable services such as revenues from direct broadcast satellite, websites, online and retail sales, international licenses and transponder subleases.

Gross Sales

\$0 to \$1,172,000
\$1,172,001 to \$50 million
Over \$50 million

Annual Dues

\$1,650 Minimum Payment
.001408 of revenue
\$82,112 + .0002598 of revenue
over \$50 million

Programmer members are billed annually in February. A full year's dues remittance must be submitted with this application if joining prior to August 1. New members joining after August 1 may submit a half-year's dues.

confidentiality

All member revenue data collected in conjunction with dues payments will be held in the strictest confidence. Release, publication or public use of the revenue data is prohibited.

*DUES PAID TO NCTA ARE NOT DEDUCTIBLE
AS CHARITABLE CONTRIBUTIONS*

membership application

Instructions Please complete this form and send it with annual dues payment to:
Membership Services Coordinator
National Cable & Telecommunications Association
25 Massachusetts Avenue, N.W.
Suite 100
Washington, D. C. 20001-1431
(202) 222-2310 Fax (202) 222-2311

Name of Primary Contact & E-mail

Title

Company Name & Website

Address

City

State

Zip Code

Telephone

()

Fax

()

Signature

Date

Name of Billing Contact

Billing address (if different from the above)

City

State

Zip Code

Telephone

()

Fax

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Name of Chief Executive Officer & E-mail

**TOTAL GROSS REVENUES FROM DIRECT AND INDIRECT U.S.
CABLE SALES DURING THE PREVIOUS YEAR** \$ _____

TOTAL DUES PAYMENT ENCLOSED \$ _____

ENCLOSED PAYMENT (company check)

CREDIT CARDS ARE NOT ACCEPTED



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