



NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

HOME TELEPHONE \_\_\_\_\_ MOBILE \_\_\_\_\_

EMAIL \_\_\_\_\_

- Check here if you do NOT want your email address added to The People's Channel's email list.
  - Check here if you are under the age of 18. Your parent or guardian must fill out a separate form.
  - Check here if you are associated with an organizational member of The People's Channel.
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Fill out this section only if you are associated with an organizational member of The People's Channel.

NAME OF ORGANIZATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

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By signing below, I declare that all information provided on this form is correct. I agree to provide The People's Channel with proof of residency. I understand that if any information I have provided is false, I may lose member privileges. I likewise agree to adhere to all policies and procedures set forth by The People's Channel.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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STAFF USE ONLY

DUAL \_\_\_\_\_ CH \_\_\_\_\_ D \_\_\_\_\_ CIVIL ID# \_\_\_\_\_ DATE ENTERED \_\_\_\_\_



To help us better understand who we serve, could you please tell us a little bit about yourself? All information is optional.

Do you subscribe to cable? \_\_\_Yes \_\_\_No

How often do you watch cable access television?

\_\_\_Daily \_\_\_Weekly \_\_\_Monthly \_\_\_Hardly Ever \_\_\_Never

Gross yearly income?

\_\_\_<10k \_\_\_10-15k \_\_\_15-20k \_\_\_20-30k \_\_\_30-45k \_\_\_>45k

How did you hear about The People's Channel?

\_\_\_Friend \_\_\_Newspaper \_\_\_Radio \_\_\_TV \_\_\_Other: \_\_\_\_\_

How would you describe your ethnicity?

\_\_\_Native-American \_\_\_Caucasian \_\_\_Asian-American \_\_\_Latino/a  
\_\_\_African-American \_\_\_Other: \_\_\_\_\_

Primary language?

\_\_\_English \_\_\_Spanish \_\_\_French \_\_\_German \_\_\_Other: \_\_\_\_\_

Secondary language?

\_\_\_English \_\_\_Spanish \_\_\_French \_\_\_German \_\_\_Other: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Special talents: \_\_\_\_\_