



TDGA Membership Application Form (To Be Used When Applying by Mail)

If you are interested in enrolling more than one member, please complete an individual form for each member. (This form may be duplicated.)

Please complete by providing the information requested. If you are a new member, you will receive a confirmation from TDGA within three days following receipt of this form and your payment by check or money order.

Name of Applicant: _____
(Please write or print legibly)

Current Title/Position: _____

Call Letters: _____
(Please include all Call Letters of Stations for which you are responsible.)

Mailing Address: _____

Additional Address Info (Apt, Suite, Floor, etc.): _____

City, State & Zip Code: _____

Telephone: (_____) _____ **Fax:** (_____) _____

E-Mail Address: (Must Be Included) _____

Traffic Software System Used: (for our own information only): _____

I would like my USERNAME ID to be: _____

I would like my PASSWORD to be: _____

I am not currently a TDGA Member and understand the initial first-year membership dues totaling \$45.00 is enclosed with this application. After the initial one-year membership, all subsequent annual member dues will be reduced to \$30.00 per year.

I am currently a TDGA (dues-paying) Member, and understand my membership will be extended for an additional year, upon receipt of this form and accompanying payment. The 'earned' renewal fee is \$30.00 per year, and payment is enclosed with this completed form..

Please return this completed form, one for each individual, by mail, to:

TDGA-Traffic Director's Guild of America
26000 Avenida Aeropuerto, Bldg. 114
San Juan Capistrano CA 92675

Phone: (949) 429-7063 or E-Mail: tdga@cox.net