

Member Application Form

Thank you for your interest in the Ontario Community Newspapers Association, a non-profit industry association representing more than 300 community newspapers.

The List of Services will give you information about the programs and services available to OCNA members.

To become a member we would ask you to complete this Membership Application Form in its entirety and return it to OCNA's Burlington office, c/o Member Services Manager.

All membership applications are processed by the Member Services Co-ordinator/Manager and reviewed by the Member Selection Committee before being sent to the OCNA Board of Directors for decision.

The Board generally meets four times per year. Please see the next few membership application deadlines on this page.

Please note: The Ontario Community Newspapers Association provides services in English. Member newspapers published in other languages may not have access to association programs such as General Excellence Awards. Applicants and member newspapers bear OCNA's cost to read and spot check publications to ensure they meet OCNA membership criteria.

If you have any questions, please feel free to call 905-639-8720 ext. 232. We look forward to serving you.

For the April 2009 Board Meeting:

Deadline is April 3, 2009

For the June 2009 Board Meeting:

Deadline is June 5, 2009



Active Member Application Form

(please circle the appropriate response, where choices are offered)

Identification

Name/position of person applying _____

Paper name: _____ Date paper started _____

Phone number _____ Fax Number _____ Email address _____

Owner name _____

Membership Criteria

The OCNA board of directors shall in its sole discretion determine whether such community newspaper qualifies as an Approved Community Newspaper having regard to the following criteria and such other criteria as the directors may from time to time determine. Below we state the criteria and then ask you to describe how you comply.

(i) an Approved Community Newspaper shall be print publication and have a name or title and shall have a geographical area in Ontario;

Please describe the geographical area and community served :

Kindly state the number of copies you distribute in your largest edition to every FSA (1st 3 digits of the postal code) with your circulation area:

FSA	Copies	FSA	Copies	FSA	Copies	FSA	Copies
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

(ii) shall have a known office of publication open to the public during normal business hours where business is to be transacted;

Office Location:

Street _____ P.O. Box _____

Town _____ Postal Code _____

Office hours _____ This office is within newspaper circulation area? Yes No

(x) shall be carried on in accordance with the highest ideals, ethics and traditions of the newspaper profession and in accordance with the objects contained in the Letters of Patent of the Association;

Kindly outline the policies or practices in place to meet this criterion:

Please supply the names and phone numbers for three references:

(xii) must have a current, independent verified circulation audit, such as CCNA verified audits, ABC, CCAB, ODC;

All new Active Members have six months after becoming a member to complete their initial audits.

Edition Name/Publish Day	Audit Name	Last Audit Date	Attach Reports
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	

(xiii) shall be available to the general public.

How is your paper distributed, eg adult carriers drop door to door?

Please explain how any interested party can gain access to this publication:

may be published in any language

In what language(s) is this newspaper published?

If not published in English, kindly indicate how OCNA might gain access to an independent party who can read the publication periodically to see that it meets the above criteria.

Enclosures

Please include with this application:

1. Seven copies each of your last two issues (14 papers in all)
2. Seven copies of your advertising rate card
3. Your latest circulation audit report (If you are not yet audited, you will have six months to complete your initial audit)

Kindly send complete package to OCNA, c/o Member Services Manager, 103-3050 Harvester Rd. Burlington ON L7N 3J1. Please call 905-639-8720 if you have any questions, or visit our web site at www.ocna.org.

Application Process

1. Applicants are encouraged to confer with the OCNA Member Services Co-ordinator/Manager to understand OCNA services, this applicant form, and the application process.
2. Once OCNA receives the application, the Member Service Co-ordinator/Manager reviews it to ensure it is complete, and then forwards it to the OCNA Member Selection Committee.
3. The Member Selection Committee reviews the application and sends a recommendation about the status of the application to the OCNA Board of Directors.
4. Once an application has been approved, OCNA will invoice the new member for the annual membership fee, prorated monthly from January to December.

Next Steps

Upon acceptance to OCNA, you will receive a "Welcome to the Association Package" that will include:

1. Association bylaws and information about the association/board.
2. The name and contact information of the OCNA Board member assigned to you.
3. A request for more detailed information about your publication including a questionnaire for Ad*Reach, OCNA's display advertising division, asking for advertising information. Once this information is complete, your newspaper will be included on the Ad*Reach rate card.
4. Information and a contract for the Network Classified Advertising program. Please support your association with this important revenue-generating program so we can continue to offer you other valuable services.
5. An information package from CCNA, which will include a Verified Circulation Audit kit if you are not already audited.
6. Copies of our monthly newsletter NewsClips, and weekly copies of our e-mail bulletin E-Clips.

OCNA Active Members automatically become members of the Canadian Community Newspapers Association (CCNA). Member fees to the national association are paid by OCNA on your behalf.

Understandings

All new Active Members are Probationary Active members for the first year and not able to publish the OCNA logo.

All new Active Members have six months after becoming a member to complete their initial audits. Details will be provided with your acceptance package.

The Ontario Community Newspapers Association will provide services in English. Member newspapers published in other languages may not have access to all association programs such as the Better Newspaper Awards.

Applicants and member newspapers bear OCNA's cost to read and spot check publications to ensure they meet OCNA membership criteria.

I hereby acknowledge that I have read the attached information about OCNA and that I accept all stipulations pertaining to this application, and agree that the information contained in this application is true and complete to the best of my knowledge.

Signed _____ Dated _____

2009 Fee Schedule
Ontario Community Newspapers Association
also includes membership in
the Canadian Community Newspapers Association

Class A) ACTIVE MEMBERS

Circulation	Basic Fee
0 - 2,000	\$572
2,001 - 3,000	695
3,001 - 4,000	968
4,001 - 5,000	980
5,001 - 6,000	987
6,001 - 7,000	993
7,001 - 8,000	998
8,001 - 9,000	1,006
9,001 - 10,000	1,047
10,001 - 20,000	1,138
20,001 - 30,000	1,163
30,001 - 40,000	1,188
40,001 - 50,000	1,215
more than 50,000	1,220

Active Member Group Discounts:

5-14 newspapers: 10% 15+ newspapers: 20%

Class B) ASSOCIATE - \$250

Class C) FELLOWSHIP - \$150 Voluntary donation to OCN Foundation

Fees are pro-rated monthly for new members joining throughout the year.

GST to be added to these prices. OCNA's GST number is: R107797326