



1) Information about your group

Name of organization or collective : _____

Name, position & email of main IMAA liaison person: _____

Director's name & email if different from above: _____

Mailing Address: _____

City, Prov/Terr, postal code: _____

Phone : _____ General email: _____ Web: _____

Facebook: _____ Twitter: _____ Instagram: _____

Vimeo: _____ Youtube: _____ Other social media: _____

Total yearly attendance or participation in your activities: (important for IMAA statistics): _____

Region: Please check the region(s) in which you conduct your activities.

- Pacific (BC/YT)
- P/NWT (AB/SK/MB/NT/NU)
- Ontario
- Québec
- Atlantic (NB/NS/PE/NL)
- NIMAC (Nat. Indigenous Media Arts Coalition)

2) Payment

2.1 Annual allied membership fee: \$25

Please make cheque payable to "IMAA".

2.2 Optional donation to IMAA: We enclose an additional donation of \$ _____ to IMAA.

Please send us a receipt for this charitable donation.

2.3 NIMAC Solidarity Membership: In addition to our IMAA allied membership, our organization wishes to become a Solidarity Member of the National Indigenous Media Arts Coalition. We enclose a cheque made out to NIMAC in the amount of \$ _____ (suggested amount: \$50).

The NIMAC Solidarity membership was launched in 2015 to demonstrate the media arts community's solidarity with NIMAC and the constituency it represents. By becoming a non-voting Solidarity member and paying a symbolic membership fee and optional donation, your organization will show its support for a strong national Indigenous-led coalition that advances the goals of Indigenous artists and organizations. To learn more about NIMAC go to www.nationalimac.org

3) Allied Membership Criteria

Members must support the creation, distribution or presentation of media arts and:

- Support sexual and gender equality in the centre
- Support cultural equity
- Share the aims and objectives of the IMAA

I hereby attest that the organization/collective meets IMAA's allied membership criteria.

Name: _____ Signature: _____ Date: _____

New Allied Member Application Only

Please provide a short explanation of why you wish to become an Allied Member of IMAA.