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Member Certification Form

PBS MEMBER STATION MEMBERSHIP CERTIFICATION AND AGREEMENT

FY 2015 (July 1, 2014 - June 30, 2015)

Status: APPROVED

First and Last Name*

E-Mail Address*

This PBS Member Station Membership Certification and Agreement (the “Agreement”) is made by and between the Public Broadcasting Service, a District of Columbia not-for-profit corporation with principal place of business at 2100 Crystal Drive, Arlington, Virginia, 22202, (“PBS”) and (“Member Organization”) the licensee of PBS member stations as further described below in Section I.

Member Organization hereby submits the following information and makes the designations and certifications for FY 2015 as set forth below:

I. Member Station Information

Please enter your Station information:

Station Call Letters (or State Network)*

Licensee Organization (per FCC License)*

if other, Operating Organization

Licensee Type

Organization Street Address*

Organization City*

Organization State and Zip Code*

Station Information

Please list your transmitter information here:

Please detail below any changes to your transmitter or operation that may have impacted your digital population coverage. (For example, change in the number of transmitters, location, power, etc...):

Digital Services

A.
Broadcast

Multicast Channels

Please provide below the name and general description of each of your station's multicast channels. You do not need to provide a description of nationally packaged channels like PBS World, Create and VME.

Channel

Channel #1

Remove

Channel #1

Remove

Channel #1

Remove

Add Row

Identify your Primary PBS Channel:

Primary PBS
Channel

B. Cable/Satellite/FiOS/Mobile/Other

Please describe any additional services your station is providing via Cable, Satellite, FiOS, Mobile, the Internet or any other means. (For example, an educational channel on Cable)

II. Designation of Representatives of Members

Article III of the PBS By-Laws requires that each Member annually designate three representatives as follows:

- One professional representative, who shall be an officer or employee of the Member.
- Two lay representatives, each of whom shall be a member of that Member's Board of Directors (or equivalent governing body) or its designee, but in no event a person employed as a noncommercial broadcast professional; and

Under the By-Laws, any one of the representatives, at the Member's designation, shall represent, vote and act for the Member in all affairs of PBS in which the Member is entitled to vote or participate (e.g., the Annual Meeting of the Members and the election of professional directors to the Board). A Member may change its representatives at will and may appoint a substitute representative by giving written notice to the PBS Corporate Secretary.

Please designate your station's professional and lay representatives below:

Professional Representative

Name

Title

Mailing Address

Email Address

Phone Number

[NOTE: For purposes of communications regarding governance and station services matters, PBS will contact the Professional Representative identified above.]

Lay Representatives

1. Name

Title

Mailing Address

Email Address

Phone Number

2. Name

Title

Mailing Address

Email Address

Phone Number

III. Membership Certification

On behalf of the Member Organization, a member of the Public Broadcasting Service, I certify that the public television broadcast station or stations operated by the Member Organization shall at all times comply with the PBS By-Laws and the policies, terms and conditions of membership established thereunder (collectively, the “Membership Rules”), including, but not limited to:

- Policy on Admission to PBS Membership
- Membership Eligibility Criteria and Requirements
- Benefits and Obligations of PBS Membership
- Criteria for Evaluation Sister Station Eligibility
- Program Differentiation Plan
- Terms and Conditions for Use of PBS Content
- PBS Common Carriage Guidelines
- Prerelease Guidelines for PBS Programs
- Rules for Use of PFP Programs & Guidelines for Best Practices in Multi-Station Markets
- PBS Editorial Standards and Policies
- PBS Guidelines for At-Risk and Unserved Areas
- PBS Policy on Member Station Accounts Receivable

I acknowledge that the Membership Rules are available to the Member for review and that it is the Member’s responsibility to be aware of all current Membership Rules (available at http://mypbs.org/Member_Handbook/) and

any future modifications or additions thereto.

I further certify that the information provided in this Agreement is true and correct to the best of my knowledge and belief, and that I am authorized to make the certifications contained herein on behalf of the Member Organization. I understand and acknowledge that this certification is a requirement of membership in PBS.

Signature*

Title*

Date*

If you have any questions about this form, please contact Thomas Crockett (tcrockett@pbs.org) or Vanessa Butler (vnbutler@pbs.org).