



1715 U STREET N.W.
WASHINGTON, D.C. 20009

Voice: (202) 483-8880
e-mail: omapindc@aol.com

Fax: (202) 328-9778
or omap.dc@verizon.net

M E M B E R S H I P F O R M



Mr./Ms. First name Initial Last name

Nickname Date of birth E-mail address

Street address (Please include your apartment or unit no., if applicable.)

City State ZIP Code

Business phone no. Fax phone no. Home phone no.

MUSIC PREFERENCES
(Please check off the musical styles you feature on a regular basis.)

A-Crossover / House / Dance

B-Pop / Rock / Alternative

C-R&B / Soul / Reggae

D-Rap / Street / Hip Hop

REPORTING TO TRADES
(Please remark any of the music sources that you report to.)

12" Billboard DMA

CLUB INFO (CLUB 1, if more than one club.)

Club name

Street address

City State ZIP code

Phone no. Manager's (or owner's) name

Capacity Sun Mon Tues Wed Thur Fri Sat
 Open on

%Black %White %Other %Gay %Straight Book acts?

DVD? VHS? 3/4? Video service (if any) CD unit?

Where video is offered... % Audio + Video % Audio only

Rank the club's overall music programming 1 thru 4:
 A - Crossover / House / Dance
 B - Pop / Rock / Alternative
 C - R&B / Soul / Reggae
 D - Rap / Street / Hip Hop

CLUB 2 INFO

Club name

Street address

City State ZIP code

Phone no. Manager's (or owner's) name

Capacity Sun Mon Tues Wed Thur Fri Sat
 Open on

%Black %White %Other %Gay %Straight Book acts?

DVD? VHS? 3/4? Video service (if any) CD unit?

Where video is offered... % Audio + Video % Audio only

Rank the club's overall music programming 1 thru 4:
 A - Crossover / House / Dance
 B - Pop / Rock / Alternative
 C - R&B / Soul / Reggae
 D - Rap / Street / Hip Hop

OPTIONS
(Check off either/both extra cost services you wish to receive.)

BPM Labels

X-Mix Remixes

THIS SECTION IS FOR SHIPPER DJS ONLY

Check this box if DJ's records are to be shipped.

(If you wish your records shipped to a destination other than your home, please indicate the alternate address in the spaces provided below.)

Street address

City State ZIP code

RADIO STATION/ MOBILE FIRM / OTHER

Radio call letters / Mobile DJ company / Other

Street address

City State ZIP code

Phone no. Position / Description of duties

By signing this application, applicant (or new member) agrees to the following:

1. Pay monthly dues not later than the 7th day of each and every month.
2. Provide a Top 20 chart on a bi-weekly basis and feedback as may be required on various releases.
3. Provide a minimum of 30 days notice if leaving the pool.

Signature: _____ Date: _____