# About Cable System Membership

## Eligibility

Any person, firm or corporation engaged in the business of operating a franchised cable television system is eligible for membership in NCTA.

SMATV (Satellite Master Antenna Television System), MMDS (Multiple Distribution System) and DBS (Direct Broadcast Satellite) systems are not eligible for Membership. System membership is not open to any incumbent local exchange carrier unless that company was a System member as of February 8, 1996.

**NCTA Bylaws require that a company bring into membership all cable systems that it owns or controls. “Owns or controls” is defined as having a 25% or greater interest in a cable system.**

## Dues

Dues payment to NCTA is based on total gross revenues derived from the provision of cable service as determined by generally accepted accounting principles (GAAP). Total gross revenues shall include, but not be limited to, revenues derived from the provision of such services as basic, expanded basic, digital, premium, high-definition, pay-per-view, on-demand, interactive, Internet access, telephony, music services, installation, bulk accounts, additional outlets, remote and converter rental, sale of program guides, leased access and channels (including but not limited to home shopping, classified ads, etc.), sale of advertising time, production of advertising spots and interconnect advertising revenues. The only revenues excluded are revenues from separate lines of business not related to the provision of services over the cable system.

Dues are paid on a quarterly basis with payments computed on the previous quarter revenues under the following schedule:

|  |  |
| --- | --- |
| **Quarterly Revenues** | **Date Billed** |
| October - December | February 1 |
| January - March | May 1 |
| April – June | August 1 |
| July - September | November 1 |

Companies joining in the middle of a billing cycle should compute their dues on the last calendar quarter’s revenues. For example, if a company joins in June, dues would be computed based on revenues generated during the January through March quarter.

## Dues Schedule

Category Quarterly Revenues Dues Rate

A $0 to $12,500 $68 Minimum Payment  
B $12,501 to $1,250,000 $68 + .0027909 of revenue over $12,500  
C $1,250,001 to $2,500,000 $3,489 + .0013042 of revenue over $1,250K  
D $2,500,001 to $12,500,000 $5,119 + .0011737 of revenue over $2,500K  
E $12,500,001 to $25,000,000 $16,856 + .0008477 of revenue over $12,500K  
F $25,000,001 and over $31,770 + .0006038 of revenue over $25,000K

Example: If a system’s quarterly gross revenues are $16,250,000, Category E is the appropriate dues category. Dues would be computed as follows:

$16,856 + .0008477 x revenues over $12,500,000  
$16,856 + .0008477 x $3,750,000  
$16,856 + $3,178.88 = $20,034.88 TOTAL DUES PAYMENT

## Confidentiality

All member revenue data collected in conjunction with dues payments will be held in the strictest confidence. Release, publication, or public use of the revenue data is prohibited.

Note: Dues paid to NCTA are not deductible as charitable contributions.

# Membership Application

## Instructions

Please complete this form and send it and a Company-Owned Systems List (see below) with remittance to:

Industry & Association Affairs Department / Membership Services  
NCTA  
25 Massachusetts Avenue, NW, Suite 100  
Washington, DC 20001-1431  
Phone: 202-222-2430 Fax: 202-222-2431

## Company Information

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Joint Venture Partners: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Headquarters Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Headquarters City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Website Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Chief Executive Officer or Election Contact

Name and Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone & Fax Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Dues Billing Contact

Name and Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Phone & Fax Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Membership Dues

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Total gross revenues from the provision of cable service, based on the previous quarter: | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | End of Quarter Date: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Dues Category (A, B, C, D, E or F): | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Enclosed Payment:  Note: Only company checks are accepted; credit cards are not. Dues paid to NCTA are not deductible as charitable contributions. | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of CEO Date

## Company-Owned Systems

Please attach a list of all company-owned system(s) to this application. For each system, include the following information:

System Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manager’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manager’s Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Subscribers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Counties served by the System: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Communities served: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_