



PO BOX 24771,
MIDDLE RIVER, MD 21220.
443-490-1250

The **United Drive-In Theatre Owners Association, Inc.** was formed as a not-for-profit Business League in March 1999.

Individual Drive-In Theatre Owner's, Lessee's, and General Manager's of permanently constructed, currently operating, commercial Drive-in motion picture theatres qualify for Full Membership with voting privileges. Individual Managers and previous Members of the UDITOA that have Retired qualify for Associate Membership with non-voting privileges. Individuals who are in the process of opening a Drive-In qualify for a Temporary, one-year, non-voting membership, after which their eligibility will be decided by the Board of Directors based on the progress of their Drive-In. .

Members receive the UDITOA Newsletter, Field Notes, an Annual Membership Directory, access to the on-line UDITOA Members only Discussion Board (e-mail required), as well as access to the annual UDITOA Convention held each February. Additionally, full voting members will receive a certificate, access to the annual UDITOA Business Meeting at Convention, and a Membership decal.

Yearly Membership in the Association is from October 1 to September 30 and Dues is payable by December 1 Annually.

- | | |
|--|-------------------------|
| *Full Voting Member: Owner's, Lessee's and General Managers | <u>\$50 US</u> |
| *Individual Associate Member (non-voting): Retired Owners and Managers | <u>\$30 US</u> |
| *Temporary Member (non-voting): owner in process of opening | <u>\$1000 US</u> |
- Plus a progress report reviewable annually by the board, for a limit of two years.

Membership in the Association is held in a person's name, not in the Theatre's or Company's name. Married couples may join as one Joint Membership, if both are owners of the business, which is considered one member with one vote and one mailing.

The provided information will be listed in the annual Owner's Membership Directory. Corporate Membership Directories will contain only the member's name, drive-in name, & mailing address.

PLEASE PRINT ALL INFORMATION LEGIBLY

Incomplete or questionable Applications may be returned to the Applicant or Applicant may be e-mailed for further information and/or clarification of the information provided.

BY SIGNING THE APPLICATION YOU ATTEST THAT ALL INFORMATION PROVIDED IS TRUE AND ACCURATE TO THE BEST OF YOUR KNOWLEDGE. IF APPLICATION IS FOR MEMBERSHIP AS A GENERAL MANAGER OR MANAGER, BOTH THE APPLICANT AND THE OWNER/MEMBER MUST SIGN.

MAIL COMPLETED APPLICATION TO: MEMBERSHIP SECRETARY, PO BOX 24771, MIDDLE RIVER, MD 21220.

IF YOU HAVE A THEATRE LOGO(S), ENCLOSE IT WITH THIS APPLICATION FOR INCLUSION IN THE MEMBERSHIP DIRECTORY.



UNITED DRIVE-IN THEATRE OWNERS ASSOCIATION, INC.
www.uditoa.org
INDIVIDUAL MEMBERSHIP APPLICATION

Applicant Information:

Date:

Name: _____

[Applicant's name may not be a corporate, fictitious or business name, or two different people's names with two different mailing addresses. Membership is held in a person's name, not in a Theatre or Company name. A Joint Membership may be held by a married couple, if both individuals are owners of the business.]

Application is for (mark one): Owner Lessee Retired *General Manager *Manager Temporary

MAILING Address: _____ City: _____ State: _____ Zip: _____

Primary Phone: _____ Secondary Phone: _____

Email address: _____ Fax: _____

Are you or your company a member of: National NATO: State or Regional NATO:

Did you have previous theatre experience (drive-in or indoor): _____ For how many years: _____

Do you own or operate indoor theatres: _____ How many locations: _____ How many screens total: _____

Drive-In Information (please use back of form or additional sheets for additional Drive-In(s)):

Theatre Name: _____

Theatre **PHYSICAL** Address: _____ City _____ State _____ Zip _____

Company Name: _____

Company Structure (mark one): Sole Proprietorship Partnership Corporation L.L.C.

Box Office Phone: _____ Other Phone: _____

Web site: www. _____ Email address: _____

Number of Screens: _____ Total Capacity: _____ Year originally opened: _____

Did you reopen this Drive-In: _____ If yes, how many years had it been closed: _____ Year reopened: _____

Do you make use of the Drive-In property during the off-season or daytime operations (flea market, etc.): _____

If so, describe: _____

BY SIGNING THIS APPLICATION, YOU ATTEST THAT ALL INFORMATION PROVIDED IS TRUE AND ACCURATE TO THE BEST OF YOUR KNOWLEDGE. *IF THIS APPLICATION IS FOR A GENERAL MANAGER OR MANAGER, BOTH THE APPLICANT & THE MEMBER/OWNER MUST SIGN.

Please Print and Sign This Application. All Applications Must Be Signed

Signature of Applicant _____

Signature of Member/Owner (if Applicant is a Manager) _____

MAIL COMPLETED APPLICATION TO: UDITOA MEMBERSHIP SECRETARY, P.O. BOX 24771, MIDDLE RIVER, MD 21220. PHONE (443) 490 1250. IF YOU HAVE A THEATRE OR COMPANY LOGO, ENCLOSE IT WITH THIS APPLICATION FOR INCLUSION IN THE MEMBERSHIP DIRECTORY. MAKE CHECK (IN US FUNDS ONLY) PAYABLE TO UDITOA AND SEND ALONG WITH THIS APPLICATION. YOU WILL BE NOTIFIED OF THE ACCEPTANCE OF YOUR APPLICATION.

Rev. 12/12