

BEDFORD TV



Bedford Community Access Television

Membership Form

Full Name _____

Street Address _____

Bedford, MA 01730

In order to be a member of BTV you must either live, work or study in Bedford, MA

Telephone _____

Email _____

Name of Organization if Applicable

Monetary Donations are much appreciated. Please consider giving to BTV.

___ Check if you are interested in volunteering at Bedford TV

Signature _____

Date: _____



16 South Road, Bedford, MA • 781 275 5004 • staff@bedford.tv • www.bedford.tv