

2021 OCNA Press Card Publisher's Authorization Form

Thanks for your interest in obtaining Press Cards for your staff.

Please e-mail photos to k.shardlow@ocna.org. Identify individual's name on file.

Please print clearly. Cost Position Name Newspaper **1** \$10 **1** \$10 **\$10 \$**5 _____ 🖵 \$5 _____ **□** \$5 ____ 🖵 \$5 _ 🖵 \$5 _____ **__** \$5 Form must be authorized by the Publisher or General Manager. I authorize OCNA to provide Press Cards for the above named individuals. Print name Signature Date Payment by: ☐ Invoice _____ Exp. ____ CVV ____ Credit Card ___ Allow two weeks for delivery. Send form by: E-mail to k.shardlow@ocna.org or

Mail to OCNA Press Cards, 37 Front Street E, Suite 200 Toronto, ON M5E 1B3