



# Application Form

## Applicant Information (please print or type)

Company Name	
Your Name	
Address	
City	
State	
ZIP Code	
Country	
Describe your market area	
Telephone	
E-Mail	
Website	
Editing System	

## Send this signed form, your DVD(s) and a check for \$85 payable to AAEV to:

AAEV  
13730 W. Greenfield Ave. Suite B  
Brookfield, WI 53005

## ATTESTATION OF TRUTHFUL DISCLOSURE:

By signing this application I authorize the AAEV to duplicate and distribute my submitted media to the Review Board.

By signing this application, the undersigned Applicant attests that the media included with this application is the creation of the company and individual(s) listed in the application.

By signing this application, the undersigned Applicant gives AAEV permission to contact third parties, investigate, request and obtain additional information and documentation, and otherwise verify the information contained in this application and/or substantiate the creator of the media being submitted.

AAEV reserves the right to request additional media samples at any time to verify accreditation status.

Should the applicant not gain accredited status there is no appeal or arbitration allowed other than reapplication with submission of a different media sample.

All application fees and membership dues are non-refundable.

The AAEV will not be held liable should any accredited member be found to have undertaken unethical business practices. Members may be removed from the directory should it come to the attention of the review board that unethical business practices are being employed. An appeal process may be pursued to regain accredited status.

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Signed

Date