

Island Photo Group Membership Application



NEW APPLICATION RENEWAL

Annual Dues \$30
Please make checks payable to: Island Photo Group

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Contact Information:

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Email Address: _____

Photo Submission Classification:

Enter "B" for Beginner or "A" for Advanced in each category that you would like to submit photos for critique or for PFLI.

_____ **Color Prints** _____ **B&W Prints** _____ **Digital Submissions**

If you have suggestions for Field Trips or Club Activities please note them here:

Please do not write below this line

Date Paid: ____/____/____

Membership #: _____