

<u>APPLICATION FOR MEMBERSHIP – 2017</u>

New Renewal Family Renewal	(Each person must apply separately.)
Liability Release must be signed	
Name (please print)	
Address	City State
Zip Phone En	nail
Camera Brand M	lodel
LensesSo	oftware
What is your photographic skill level? Professional Advanced Amateur Amateur Beginner	Please indicate your preference for committee membership. Please pick at least one committee on which you would serve if asked. Membership Programs
What images do you most enjoy photographing Check all that apply. Landscape Nature People Table Top Sports Photojournalism Macro Studio/Portrait	Workshops/Education Field Trips Competition/Exhibits External Judging Publicity Website Meeting Setup Sunshine Club Photographer Mentoring
How did you find out about us? Check all that apply. Newspaper Website Friend Other	Annual Dues: \$25 Single\$35 Family Make check payable to Coastal Carolina Camera Club Mail to: Carol Nowicki 233 Ravennaside Drive NW Calabash, NC 28467
	ities affiliated with CCCC. I further agree to permit usage by CCCC of my ublicity, and for which CCCC will give me artist credit.
Signature:	Date: