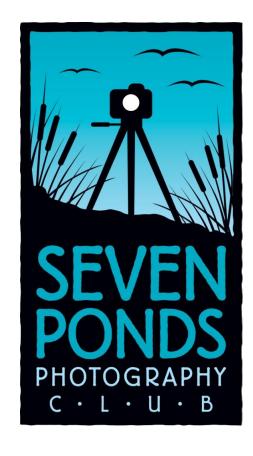
MEMEBERSHIP APPLICATION

Name: _____ Email:_____ Street: City:_____ State: _____ Zip: _____ Phone: Additional Family Member* Name: _____ Email: ☐ \$20.00 Individual □ \$30.00 Family * *(Members living in same household) Dues cover the year from May 1 through April 30 of the year MAKE CHECKS PAYABLE TO: Seven Ponds Photo Club C/O SPNC 3854 Crawford Road Dryden, MI 48428 Note: Checks may take up to 3 months to cash Pay Online: See website link https://spnc.photoclubservices.com

ABOUT YOU

Camera:
Editing software:
Photographic interests: (portraits, nature, macro, Landscapes etc.)
Training you would like offered:
Trips you would be interested in:



Email:

7pondsphotoexpo@gmail.com

Website:

https://spnc.photoclubservices.com

Facebook:

Seven Ponds Photography Club

Facebook Image Share:

SPPC Member's Shared Images