

## Membership Application / Renewal Form Frankston Photographic Club **Photography our Passion**

## Membership Application / Renewal Form

Name							
Address	Street						
	Suburb						
	State		Post Co	de			
Telephone	Home		Mobile				
Email							
New Member	This information v	Please indicate your current level of camera / photographic confidence.  This information will be used to determine your initial monthly competition entry level if and					
	•	nce entering club com			_		
	Beginner			Advanced			
	<ul> <li>By signing this form:</li> <li>I agree to accept all Frankston Photographic Club Inc. (FPC) correspondence</li> </ul>						
	electronic	electronically where possible					
<ul> <li>I authorise publication of my email address to the executive committee an</li> </ul>							
	As a member of FPC, I agree to be bound by the rules of the FPC in force at the time.						
Signature	Date						
Signature			Bute				
New Members							
The Frankston Photo	ographic Club collects	members' information	as part of its no	rmal commu	nication needs. This		
information is held	confidentially by the Cl	lub Secretary. Member	s wishing to dis	tribute inforr	nation to the entire		
	• •	the information to the	•				
Annual Membership							
•	inary Members						
	ily (each member)						
	• •	cession means pension	card holder)				
			r cara notaci j				
<ul> <li>\$30.00: Junior Membership (under 16 years of age)</li> <li>\$30.00: Ordinary Members who join after 31 December</li> </ul>							
, 330.00. Olu		and arrel 31 December	· · · · · · · · · · · · · · · · · · ·		<del>.</del>		
Daymanak bu Classics	in Francisco						
Payment by Electron	ic Funds Transfer Akston Photographic C						

Bank: National Australia Bank

BSB: 083420

**Account**: 129830582

**NOTE:** Please ensure that you enter **YOUR NAME** in the **Payment Description** field.

**NOTE:** Electronic or direct payment still requires a completed application form to be presented to the club.

Completed forms may be forwarded electronically

Committee Approval Date:	Committee Signature:	
Receipt No:	Membership Start Date:	