



# Membership Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Mobile: \_\_\_\_\_ Home: \_\_\_\_\_

Email: \_\_\_\_\_

Birthday: Month \_\_\_\_\_ Day \_\_\_\_\_

Camera(s): \_\_\_\_\_

### Experience:

- Beginner     Amateur     Experienced Amateur     Professional

### Computer:

- Windows     Mac     Other: \_\_\_\_\_

- Facebook     Other Social Media or Photo Sharing Site: \_\_\_\_\_

**Are you willing to volunteer, present, or share skills with the club?**

\_\_\_\_\_  
\_\_\_\_\_

### Special Skills or Interests:

\_\_\_\_\_  
\_\_\_\_\_

### Waiver of Responsibility:

*While precautions will be taken for club events, I understand that neither the Land O' Lakes Photography Club nor its Board of Directors can assume responsibility for personal injury or the loss of, or damage to property at events sponsored by the Land O' Lakes Photography Club.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_