

MEMBERSHIP APPLICATION

The Society retains the right to refuse membership

Personal Details

Surname.....First
Name(s).....
Title.....
D.O.B. If under 18/...../.....

Full Postal Address

.....
.....
.....
Post Code.....

E-Mail

.....

Phone Numbers

Day Time.....
Evening.....

Photographic Experience

Entry Level or Advanced (please tick)

Subscription

Full Season Fee* (Adult).....£30
Full Season Fee* (Under 18).....£15
Full time Student*£15
Cash or Cheque

Please make cheque payable to Frodsham & District Photographic Society
50% fee reduction for those joining in second half of season

Membership (for completion by F&DPS)

Member Name.....
Membership Number.....
Membership Start Date...../...../.....

Received Cash / Cheque value £.....
Signed.....
Date...../...../.....