



West Kentucky

PHOTOGRAPHY CLUB

www.westkentuckyphotographyclub.org

P.O. Box 13., Madisonville, KY 42431

Membership Form

Type of Membership: Individual Family Student Active Duty Military

Amount paid: _____ Check Cash Date paid: _____ Membership year: _____

Referred by: _____

=====

MEMBER INFORMATION:

Member's Name (Last, First, Middle Initial)

Address:

City: _____ State: _____ Zip: _____

Home Phone #: _(_____) _____ Cell Phone #: _(_____) _____

E-mail address (if any):

Website address (if any):

(Optional info:) Occupation: _____ and Retired: _____

Other hobbies: _____

We maintain an open list of emails and phone numbers, which is available to our members. You may receive WKPC e-mails or phone calls from an officer of the club and/or you will need to check for club email messages for changes to the schedule or cancellations due to weather conditions.

Membership Dues:

Membership fee of \$20 per individual, \$30 per family, \$10 each for students, and \$5 for active duty military.

=====

PHOTOGRAPHY INFORMATION:

Experience level

Novice Intermediate Professional

Camera Editing Software

Photoshop Elements Photoshop CS Paint Shop Pro

Other: Please Specify _____

Type of Camera

Point and Shoot, please specify (example Nikon Coolpix S230): _____

Digital SLR, please specify (example Canon 500D): _____

Other: _____

Photographic Interests:

Comments:

=====
WEST KENTUCKY PHOTOGRAPHY CLUB GUIDELINES AND AGREEMENT

- 1. Privacy considerations: your name, photography, and e-mail address are published in a directory available to members on the club's web-site. We do not publish phone numbers without your permission.
2. I warrant and represent that all works that I submit now and hereafter to the club for publication are original works of authorship, authored by me, and me alone, free of any claims from any third parties. I further warrant and represent that the club's publication of any such work does not and will not infringe the rights of any third party.
3. Any entry I may submit for club-sponsored exhibition will be suitable for general audiences including small children. Further, I acknowledge that it is my personal responsibility to deliver my entries for exhibit at such time as called for by the club, and to arrange for the retrieval of such entries at the published close of such exhibit.

Your signature below indicates that you agree to hold the club, its officers, members, or other affiliated persons or entities harmless and indemnify them against any claim or loss of any kind. You also agree to hereby waive and release West Kentucky Photography Club and its affiliates from any and all claims for accidents and/or injuries that may occur on account of participation in the club, including club meetings, outings and projects. (A parent or guardian must sign for those under the age of 18.)

Member's signature

Dated: _____

The mission of the West Kentucky Photography Club is to serve our members by encouraging development of their photographic skills through education, exhibitions of photographic accomplishments, friendship with others who share a love of photography and to share our talents with individuals and organizations in our community.