

Camera Club of Brevard Membership Application

## WELCOME!

Date: / /
Membership Annual dues:Single – \$45Family - \$55
Pro-rated MembershipSingle after July 1- \$22.50Family after July 1- \$27.50
November through December pay the annual dues and get those 2 months free.
Primary Member: (Please print clearly)
First Name:Last Name:
Preferred Contact Number) ()
Email:
Family Members:
Name:
Email:
Name:
Email:
Name:
Email:

## Amount Paid: \$\_\_\_\_\_ PayPal \_\_\_\_\_ or Check #\_\_\_\_\_

You may join one of three ways:

1 - Print this form, fill it out and bring it with your check to the next meeting

2 - Fill out this form and email it to info@ccbrevard.com and pay with the PayPal link on the Join Us page

3 - Print this form, fill out and mail with your check to:

Camera Club of Brevard P. O. Box 542 Melbourne, FL 32902

## For additional information or help, please contact: info@ccbrevard.com

How did you hear about the club?
Please let us know what you would like to help with:
MembershipField tripsCompetitionsCommunications
Public RelationsAnnual dinnerPlanningNewsletter
WebsiteBoard positionProgram developmentEducation

Please contact us if you are not receiving our communications.

The information you provided is confidential and will only be used by officials of the Camera Club of Brevard.