



PHOTOGRAPHY CLUB OF BEAUFORT

PO Box 4835, Beaufort, SC 29903

_____ New Member _____ Renewal

1. Name _____

Address _____

T own/S tate/Zip _____

Phone _____ E mail _____

2. I am interested in:

Learning more about Photography _____ T eaching others _____

E xhibiting my work _____ F ield T rips _____

O ther _____

3. My skill level in photography would be best described as:

B eginner _____ I ntermediate _____ A dvanced _____

4. My interests are (check all that apply):

D igital photography _____ C olor P rints _____ B lack & W hite P rints _____

D arkroom work _____ C olor S lides _____

5. I would like to volunteer to help in the following areas: (Please check one or more):

P rogram C ommittee _____ P lanning/leading field trips _____

C ompetition C ommittee _____ H elping with E xhibits _____

N ewsletter _____ W orking on W ebsite _____

O ther (Please specify) _____

Membership for one year - July to June: \$20 (per person)

(Make checks payable to Photography Club of Beaufort
and mail to PO Box 4835, Beaufort, SC 29903)