



ASPLEY CAMERA CLUB Inc.

PO BOX 71, Aspley Qld

Email admin@aspleycameraclub.org.au

APPLICATION FOR MEMBERSHIP

Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Other	<input type="text"/>
Name:	<input type="text"/>				
Address:	<input type="text"/>				
Home Phone:	<input type="text"/>				
Mobile Phone:	<input type="text"/>				
Email Address:	<input type="text"/>				

Aspley Camera Club Inc. collects personal information for the purpose of membership records. Personal information will not be disclosed to third parties without consent unless required by law.

If you have previously belonged to Aspley Camera Club or another camera club, you may compete in Aspley CC competitions at the grade awarded in your previous club.

Give name of most recent Camera Club and grade at which you competed. If previously a member of Aspley Camera Club please also give member number, if possible.

Camera Club	Grade/ ACC No:
<input type="text"/>	<input type="text"/>

We welcome junior club members, but they **MUST** be accompanied by a responsible adult.

Tick the box if you've not been a camera club member before but would like to compete in Aspley Camera Club competitions at a grade higher than B Grade.

You will need to submit a selection of 10 images for assessment.

I understand that Aspley Camera Club Inc. holds a public liability insurance policy through Photographic Society of Qld (PSQ), which in 2017 - 2018 is valued at \$20m.

Projected Images from club competitions are used to select club entries for Interclub Competitions and used in the Newsletter. Please email admin if you **DO NOT** wish your projected images to be used for this purpose.

Signature of Applicant:	<input type="text"/>	Date:	/ / 20
Signature Parent/Guardian	<input type="text"/>	Date:	/ / 20

Office Use Only

Proposed By:	<input type="text"/>	Signature:	<input type="text"/>
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Date Joined:	/ / 20	Date Resigned:	/ / 20
Amount Paid:	<input type="text"/>	Receipt No:	<input type="text"/>
Membership No:	<input type="text"/>	Members' Register:	<input type="checkbox"/> Web Site <input type="checkbox"/> Member List