

U N L I M I T E D
V I S I O N
 P H O T O C L U B . I N C

UVPC MEMBERSHIP APPLICATION		
APPLICANT INFORMATION		
Today's Date:	Cell Phone:	
Name:	Phone:	
Current address:		
City:	State:	ZIP Code:
Email:		
EQUIPMENT INFORMATION/SKILL LEVEL		
What gear do you have?		
What level are you? (circle): Beginner, Amateur, Advanced, Semi-Pro, Pro		
How long have you been shooting? (Number of years):		
What do you shoot most? (circle) Nature; Sports; People; Abstract; Macro; Travel		
Other:		
WHAT ARE YOU HOPING TO GET OUT OF THE CLUB?		
Please state what you would like to see the club do/what you are trying to get out of the club, etc.		
HOW DID YOU FIND OUT ABOUT UVPC?		
Please tell us how you found us:		
EMERGENCY CONTACT INFORMATION		
In case of an emergency; who should we contact?		
Contact Person:		
Telephone number(s):		
Relationship:		
MEMBERSHIP DUES:		
Membership dues are \$30/year and collected at the time of application. Renewal is April 1 st of each year. Members joining after Jan 1 st will not pay dues again on April 1 st .		
SIGNATURES		
I understand that UVPC (Unlimited Vision Photo Club, Inc.) may use my email/personal information for club purposes. I further acknowledge that I must abide by UVPC's bylaws and conduct myself in a professional manner while at club meetings and club sponsored functions.		
Signature of applicant:		
Occupation:		
Received by:	Date:	