

Lancaster Camera Club Membership Form

Check One: NEW MEMBERSHIP RENEWAL

You must be a member of the club to enter member-only competitions and/or participate in certain events. Each member is entitled to the full benefits of the club. Memberships run for one calendar year (January through December).

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Email: _____

Check One:

Individual Membership - \$30.00 (After July 1, new members pay \$15)

Family - \$45.00

Names of Family Members:

Student - \$12.50 for College Students, \$7.50 for High School Students

School: _____

Signed: _____ Date: _____

The contact information listed above is made available to all members occasionally by email or upon request. Check one:

Acceptable (default) Unacceptable

Make checks payable to **Lancaster Camera Club** and submit this form and payment to the Club Treasurer, David Kramer, at meetings or by mail:

Lancaster Camera Club, % David Kramer, 272 Sand Ct, Ephrata, PA 17522

For Club Use Only

Received: _____ CK# _____ Cash _____ Card Issued: _____