Tidelands Photography Club
Membership Application
WRITE OR PRINT LEGIBLY - PLEASE

Name: _____ (both names if Family)

Name 2: _____

E-Mail: _____

E-Mail 2: _____ (second person if Family)

Phone Number with Area Code: (____) _____ _____

Membership Fee:	**Individual**	**Family**
January	$35.00	$55.00
February	$32.00	$50.50
March	$29.00	$46.00
April	$26.25	$41.25
May	$23.50	$36.50
Jun	$20.50	$32.00
July	$17.50	$27.50
August	$14.50	$23.00
September	$12.00	$18.50
October	$ 9.00	$14.00
November	$ 6.00	$ 9.00
December	$35.00*	$55.00* (* Includes following year)

("This pro-rated schedule pertains to new members only. Returning members will pay the full year individual/family rate of $35/$55".)

Photography Interests:
____ Landscape Photography ____ Macro ____Sunrise/sunset
____Post Processing ___ Flowers ___ Other specify _____

Volunteer Interests:
Presenter: _____ Board Member: _____ Field Trip Leader: _____

Other (Specify): _____

Mail completed application and check to: Tidelands Photography Club
c/o Linda Dittrich
1324 Royal Devon Drive
Myrtle Beach, SC 29575