



SUNCOAST CAMERA CLUB

of Clearwater, Florida

Application for Membership

Name (1) _____ Regular Social
(Last, First MI, "Nickname")

Name (2) _____ Regular Social
(Last, First MI, "Nickname")

Street Address _____ Apt/Lot _____

City _____ State _____ Zipcode _____

Home Phone _____ Cell Phone (1) _____ Cell Phone (2) _____

Email _____

Occupation _____
(If retired, former occupation)

Other Hobbies _____

Signature _____ Date _____

If accepted, I agree to abide by the SCC Constitution and By-laws and to participate in activities

Photo Interests Nature Travel Portrait Photojournalism

Other _____

Other Camera Club Affiliations _____ Classification _____

Photographic Schools Attended _____

Photographic Honors/Awards _____

How did you hear of the Suncoast Camera Club? _____

Make check payable to Suncoast Camera Club Check # _____ Cash Amount \$ _____

Interviewed by _____ Date _____

Classification B A AA

Sponsor _____