

SWARTLAND

F O T O G R A F I E K L U B



APPLICATION FOR MEMBERSHIP

Name: _____

Address: _____

_____ Postal Code: _____

Tel Home _____ Cell: _____

email address: _____

Are you a registered member of the PSSA Yes No

PSSA member no: _____

Are or were you ever member of another photography club/society Yes No

If YES, which ones? _____

For members holding membership of more than one club.

PLEASE INDICATE YOUR CHOICE OF PRINCIPAL CLUB: _____

Membership fee is payable on application – for 2023 – R300 per adult member, R150 per scholar member – if you join after 1 July of a specific year the membership fee will be 50% of the fees above for the rest of that financial year.

For electronic transfers: Swartland Fotografieklub, NEDBANK, Malmesbury,

Cheque Acc 110 754 848 9

Please send this form and proof of payment to info@swartlandphotoclub.co.za

I hereby subscribe and agree to abide by the Constitution and by-laws for the Swartland Photographic Club and give permission for my email address and mobile phone number to be used in Club communication.

Signature: _____ Date: _____



Affiliated to the Photographic Society of South Africa

Swartland Photographic Club
www.swartlandphotoclub.co.za