New England Shutterbugs
2025 – 2026
Membership Application

(Please Print Clearly)

Name: _____

Address: _____

City/State/ZIP: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Annual Membership Fee: *$50.00 for Individual* *($30.00 after January 1st)*

$70:00 for Family *($50.00 after January 1st)*

$25.00 for Student

Payment Method: *CASH [ ]* *CHECK [ ]*

Please Make Check Payment To: *Donna Miller*

Mailing Address
Donna Miller
65 Fire Road #7
Lancaster, MA 01523

Experience Level: *Class B - Beginners [ ] Class A – Intermediate [ ] Masters – Advanced [ ]*

Camera(s) You Use: *Canon [ ] Fuji [ ] Nikon [ ] Olympus [ ] Pentax [ ] Sony [ ] Other [ ]*

Software Used To Process Images: Corel [ ] Elements [ ] Photoshop [ ] Picasa [ ] Other [ ]

Favorite Things You Like To Photograph: _____

Note: When there is a need to cancel a meeting due to inclement weather members will be informed via E-mail. If you don't have E-mail and prefer to be notified by another means please add your contact data below.

Please Be Specific:: _____

I have read and agree to abide by the Constitution and Bylaws of the New England Shutterbugs

Signed by: _____ *Date:* _____

Received by: _____ *Date:* _____