

New England Shutterbugs 2020 – 202 I Membership Application

(Please Print Clearly)						
Name:						
Address:						
City/State/ZIP:						
Home Phone:						
Cell Phone:						
Annual Membership Fe	ee: \$20.00 for In \$30:00 for F					
Payment Method:	CASH []	CHECK []				
Please Make Check Pa	yment To:	Donna Miller				
		<u>Mailing Address</u> 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 Subjects You L	ike To Photograph:					
		eting due to inclement weather members will be informed via E-mail. ified by another means please add your contact data below.				
Please Be Specific::						
I have read and agree	to abide by the Consti	tution and Bylaws of the New England Shutterbugs				
Signed by:	Date:					

_Date: _____

Received by: