

Pagosa Springs Photography Club Membership Application

Name: _____
(If family, include all first names)

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____ Cell Phone: _____

E-Mail: _____

Date: _____

How did you hear about us? (Check all that apply)

- Renewing Member Newspaper Web Facebook
Friend Other _____

Club Dues are \$25/calendar year for Individuals; \$35 for Families

Date dues paid: _____ Amount Paid: _____

Cash: _____ or Check #: _____

Received by: _____

Dues may be paid at a Photography Club meeting, or mail to:

Pagosa Springs Photo Club
Susanne Russell
135 Country Center Drive, Suite E
Pagosa Springs, CO 81147