



Professional Photographers of Pennsylvania Membership Application

Please mail this form with your check for annual dues (or contact Ron for credit card processing) to:
Ron Bookwalter (PPA of PA Treasurer)
3280 Spring Road
Carlisle, PA 17013
717-584-0833 professionalphotographersofpa@gmail.com

| Select One (✓) | Membership Category | Annual Dues | Membership Qualifications | Included Benefits | | | | |
|----------------|---------------------|-------------|--|-------------------|------------------------------------|--------------------------------|-----------------------------------|--------------------------------|
| | | | | Listed Online | Education in Meetings & Convention | Eligible for Print Competition | Your Spouse & Children May Attend | Full-Time Employees May Attend |
| | Studio | \$195 | > 50% of income from photographic services | Yes | Yes | Yes | Yes | +\$20 each annually |
| | Photographer | \$195 | < 50% of income from photographic services | Yes | Yes | Yes | Yes | No |
| | Student | \$99 | Full-time enrolled 4yr college student | No | Yes | No | No | No |
| | Inactive | \$55 | Retirees, etc. No photography income | No | Yes | No | Yes | No |

| Required Information | | | | |
|---|---------------------------|-----------------|--------------|--|
| Applicant Name(s): | (incl. business partners) | | | |
| Business or School: | | Website: | | |
| Postal Address: | | | | |
| City: | | State: | ZIP: | |
| Phone#: | | Mobile#: | | |
| Email Address: | | | | |
| Federal EIN#*: | (if applic.) | Sales Tax ID#*: | (if applic.) | |
| National PPA ID#: | (if applic.) | PPA Degrees: | | |
| # of employees of Firm Owner who may attend meetings: | (if any) | | | |

* For the purpose of verification, **Studio and Photographer applicants** who make taxable sales to the general public must enter their ID# for collecting sales tax, or else call Ron Bookwalter to provide this information by phone. **The PPA of PA will treat EIN/Tax ID numbers as confidential data for verification purposes only, not for publication.**

| Badges Needed for Others who may Attend Meetings & the Convention | | | |
|---|--|--|--|
| Employee Names: | | | |
| | | | |
| Spouse / Minor Children: | | | |
| | | | |

| Types of Photography you Provide to Clients (✓) | | | |
|---|-------------|--------------------------|------------------------|
| <input type="checkbox"/> | Portrait | <input type="checkbox"/> | Commercial |
| <input type="checkbox"/> | Wedding | <input type="checkbox"/> | Industrial |
| <input type="checkbox"/> | H.S. Senior | <input type="checkbox"/> | Video |
| | | <input type="checkbox"/> | Audio/Visual |
| | | <input type="checkbox"/> | Other (describe below) |

PPA of PA Code of Conduct

As a requirement for admission to and retention of membership and participation in this association, each member and participant shall agree to upgrade and improve their knowledge and skill of professional photography, marketing, and related areas; in all dealings with users of photography and the general public, strive to present all services with the highest levels of professionalism; deal with all users of photography and the general public with honesty and integrity; not violate FTC or state regulations or court decisions; share the knowledge and skill of photography with fellow professionals; support and assist with education in the art and science of photography; and recognize the authority in these matters of the Professional Photographers Association of Pennsylvania.

Review Process

After submitting your completed application form and first-year dues payment, you may begin participating immediately in PPA of PA meetings, seminars, the annual convention, and other benefits of your membership. You will receive a confirmation letter from the PPA of PA President, after a short review period. The PPA of PA, Inc. disclaims all responsibility for any loss or damage to your equipment, prints, etc., while attending a meeting, seminar or convention.

By submitting this application you agree to the PPA of PA Code of Conduct.

I have read and understand the above and certify that the information given is correct. I wish to apply for membership in the Professional Photographers Association of Pennsylvania, Inc.

Applicant's Signature: _____ Date: _____

| | | | |
|-----------------|-------------------|------------------|----------------------|
| Office use only | Date Received: | Check#: | Amount: \$ |
| Date to S&E: | Welcoming Letter: | Reviewed by S&E: | Confirmation Letter: |