

**APPLICATION FOR MEMBERSHIP IN
PAUMANOK CAMERA CLUB**

**Member of
Photographic Federation of Long Island**

(Please Print Clearly)

Date _____

Name _____ Nickname _____

Home Street Address _____ Apt. # _____

City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

E-mail Address _____

Please indicate your photography experience level:

Beginner, Intermediate, Advanced.

If you are a beginner, would you be interested in a mentor, if available? _____

If you are advanced would you be willing to share your skills? ___ If so what are your strengths?

The Paumanok Camera Club meets 3 times a month at the Brookhaven Recreation Center, 20 Wireless Road, Centereach, NY 11720.

Bring this application to a meeting along with a check made out to Paumanok Camera Club for \$50 for one year's membership.

Ask for Doris Diamond, Membership Coordinator

**To receive our emails, PLEASE SIGN UP FOR OUR MAILING LIST ON
THE "ABOUT US" PAGE on our website: www.paumanokcameraclub.org**