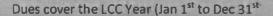
Lighthouse Camera Club

Membership Application



Membership fee is \$50 per year for a Family or \$30 for an Individual

To join please bring this completed application when attending a club meeting.

The club meets the Second Tuesday of each month at 6PM

Location: North Palm Beach Library 303 Anchorage Dr

North Palm Beach, FL 33408

Email: lighthousecameraclub@gmail.com

Make checks payable to Lighthouse Camera Club (or LCC)

Primary Member:		
Name:		
Address:		
City:	State:	Zip Code:
Phone:	E-Mail:	
Occupation:		
Secondary Member:		
Name:		
Address:		
City:	State:	Zip Code:
Phone:	E-Mail:	
Occupation:		
_		thouse Camera Club. I (We) agree to indemnify and ho ting from my (our) participation in any club activities.
Signature Primary Memb	er:	Date:
Signature Secondary Mer	nber:	Date:

PAYMENT TYPE

CASH

CHECK#

DATE: