



# MEMBERSHIP FORM

Carefully and accurately complete all fields for member data (this includes current members).

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_

Family mem#2

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_

STREET \_\_\_\_\_ APT# \_\_\_ CITY \_\_\_\_\_ STATE \_\_\_ ZIP \_\_\_\_\_

PHONE #1 \_\_\_\_\_ PHONE #2 \_\_\_\_\_

E-MAIL #1 \_\_\_\_\_ E-MAIL #2 \_\_\_\_\_

WEBSITE LINK#1 \_\_\_\_\_

WEBSITE LINK#2 \_\_\_\_\_

**ATLANTA PHOTOGRAPHY GROUP** Tula Art Center, 75 Bennett Street, Suite B-1, Atlanta, GA 30309  
(404) 605-0605 [www.atlantaphotographygroup.org](http://www.atlantaphotographygroup.org) Hours Wed-Sat noon-4pm

## MEMBERSHIP AND PAYMENT

\*Student \$25 Individual \$35 Family \$60

Supporter \$100

Benefactor \$250 (1 print)

Sponsor \$500 (3 prints)

Patron \$1,000 (6 print series)

Renew New

Membership amt \$ \_\_\_\_\_

Other donation amt \$ \_\_\_\_\_

Total amt \$ \_\_\_\_\_

Cash Check Credit/Debit

# \_\_\_\_\_

Exp \_\_\_\_ / \_\_\_\_

\*SCHOOL (student members)

\_\_\_\_\_

Where did you hear about APG? Please specify: \_\_\_\_\_