



# Arkansas Outdoor Photographers Club

Mail completed form and dues to:  
Ron Russ  
18 Tortoise Park Cove  
Little Rock, AR 72211

## Membership Application

This form will be used as the basis for a directory of members, addresses and phone numbers. The other responses will help determine what activities you would like to see and what resources you may wish to offer.

If there is any information that you do not want to provide or have published in the directory, leave it blank or tell us what your wishes are. Please make any comments on the back of the sheet.

Directories are for convenience of club members; names and addresses will not be sold to any organization.

### Personal Information

**Full Name:** \_\_\_\_\_  
*Last* *First* *M.I.* *Date Completed*

**Address:** \_\_\_\_\_  
*Street Address* *Apartment/Unit #*  
\_\_\_\_\_  
*City* *State* *ZIP Code*

**Home Phone:** ( ) \_\_\_\_\_ **Alternate Phone:** ( ) \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**List all photographers in your family membership** \_\_\_\_\_

### Areas of Photographic Interest

- |  |                                      |                                     |  |
|--|--------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Portraits         | <input type="checkbox"/> Candid      | <input type="checkbox"/> Pets       | <input type="checkbox"/> Still Life      |
| <input type="checkbox"/> Commercial        | <input type="checkbox"/> Close Ups   | <input type="checkbox"/> Landscapes | <input type="checkbox"/> Nature/Wildlife |
| <input type="checkbox"/> Photo Restoration | <input type="checkbox"/> Other _____ |                                     |  |
- Please Specify* \_\_\_\_\_

### Equipment / Skill Level

- |   |   |  |
|---|---|--|
| <b>Preferred camera:</b>                        | <b>Skill level:</b>                           | <b>Imaging Editing Software:</b>         |
| <input type="checkbox"/> Point & Shoot          | <input type="checkbox"/> Beginner             | <input type="checkbox"/> Photoshop _____ |
| <input type="checkbox"/> Advanced Point & Shoot | <input type="checkbox"/> Hobbyist / Amateur   | <i>Version</i>                           |
| <input type="checkbox"/> DSLR                   | <input type="checkbox"/> Advanced Amateur     |  |
| <input type="checkbox"/> Film                   | <input type="checkbox"/> Professional         | <input type="checkbox"/> Other _____     |
| <input type="checkbox"/> Other _____            | <input type="checkbox"/> Retired Professional | <i>Version</i>                           |
- Please Specify* \_\_\_\_\_

### Special Interest

Ideas for projects, activities or Field Trips: \_\_\_\_\_  
\_\_\_\_\_  
Ideas for discussion topics or presentations: \_\_\_\_\_  
\_\_\_\_\_

### Newsletter Preference

- |                                |                                   |  |
|--------------------------------|-----------------------------------|--|
| <input type="checkbox"/> email | <input type="checkbox"/> U.S Mail | <b>Please indicate which method you would prefer to receive the monthly AOPC newsletter.</b> |
|--------------------------------|-----------------------------------|--|