



Membership Application – Part 1

“Membership Information Questionnaire” constitutes Part 2 of Membership Application.

General Requirements for Membership

All photographers that meet professional qualifications are encouraged to apply for membership. Applicants for Firm membership shall derive the major portion of their earned income from photography or photographic oriented work.

Membership in this Association may be obtained only through the Association. All applicants for membership in this Association, in any classification, shall automatically be placed on a probationary status (Candidate Member) until their names have been published in two issues of the official bulletin of this Association or for a period of one (1) year, which ever is longer. All applicants must be sponsored by an active member in good standing.

Each applicant shall respond in all spaces of this Membership Application and the Membership Information Questionnaire to the best of his/her ability. If you have no answer, enter “none” or “N/A.” Applications containing blank spaces will be returned. The Code of Conduct, Agreement and Certification, and Sponsor’s Affidavit sections of this application must be signed.

Application must be accompanied by a check for first year’s dues. Dues are non-refundable if applicant registers for an annual convention at a membership rate.

Office Use Only

Date Rec’d: _____

Chk #: _____ Amt.: _____

Business Nbr.: _____

To S&E (date): _____

Reviewed by: _____

Publ. Dates: _____

Conv. Reg. Issued: Yes No

Board: Approved Disapproved

Date of Action: _____

Returned from S&E: _____

Type of Membership Desired – see description of member categories on back.

- Firm** **Annual dues \$125** plus \$20 for each full-time employee who will attend meetings or convention. Spouse and children of owner(s) included at no additional charge.
- Supporting** **Annual dues \$195**; includes full-time employees who will attend meetings or convention. Spouse and children of owner(s) included at no additional charge.
- Associate** **Annual dues \$125**; employee participation NOT permitted. Spouse and children of owner(s) are included at no additional charge.
- Student** **Annual dues \$55**; employee participation NOT permitted. Spouse and children of owner(s) are NOT included.
- Inactive** **Annual dues \$35**; employee participation NOT permitted. Spouse and children of owner(s) are included at no additional charge.

Information About Owner or Principal Representative – Additional information is requested on Membership Questionnaire.

Applicant’s Name: _____

Business Name: _____ Business established (year) _____

Type of photography: ____ % Portrait, ____ % Wedding, ____ % H.S. Senior, ____ % Commercial, ____ % Industrial, ____ % Video, ____ % Audio/Visual, ____ % Other(explain) _____

Do you have employees? Yes No *If yes, how many full-time? _____ ; how many part-time? _____ .*

Do you have a Federal EIN Nbr.? Yes No

Do you have a State Sales Tax Nbr.? Yes No

Member of PPA (National) Yes No *If yes, how long? _____ years.*

Member of other photographic associations? Yes No *If yes, which: _____*

Photographic experience: _____ years. Specialist experience: _____ years.

Photographic or specialist training (where): _____

Other business experience: _____ years. *If so, what kind? _____*

Do you hold another job? Yes No *If yes, what? _____*

Income from photography: _____ % of total income.

Time devoted to photography: _____ % of work week.

PPA of PA Member Categories

FIRM MEMBER: A Firm Member shall be the owner, partner, manager or corporate officer of an established portrait, commercial, professional or industrial photographic department engaged in the practice of photography or in the art and science of photography in accordance with the principals of this Association and earning the major portion of their earned income from photography or photographic oriented work, except where otherwise specified. Each Firm Membership shall designate one member as its' representative to vote and hold office. All Firm Members shall have rights and privileges on the Benefits/Categories list as delivered by the Board of Governors of the Association.

SUPPORTING MEMBER: A Supporting Member in this Association shall be a manufacturer, dealer of photographic supplies and materials, or provider of services to the trade. All Supporting Members shall have rights and privileges on the Benefits/Categories list as delivered by the Board of Governors of the Association.

ASSOCIATE MEMBER: An individual who expresses a sincere desire to share in the exchange of knowledge related to the photographic arts and sciences, or an individual whose primary source of earned income is outside the profession of photography. Candidates for this membership category who engage in the sale of their products to retail clients must possess a valid sales tax or business license as required by their county and state. All Associate Members shall have rights and privileges on the Benefits/Categories list as delivered by the Board of Governors of this Association.

STUDENT MEMBER: An individual who is a full-time student of an approved photographic school; provided such individual shall furnish proof of their attendance. Such membership shall continue only while the applicant is a member of the school and shall have rights and privileges on the Benefits/Categories list as delivered by the Board of Governors of the Association.

INACTIVE MEMBER: An individual who is ineligible for membership in the Association under existing requirements. These may be, but are not limited to retirees, friends of the Association, or those temporarily not in the business community. Membership shall be granted or repealed at the pleasure of the Board, and shall have rights and privileges on the Benefits/Categories list as delivered by the Board of Governors of the Association.

Return this application, and address correspondence to:

PPA of PA, Inc. Assistant Treasurer
Gerry Solan, 2010 Past President
533 W. Main St./ Mount Pleasant, PA 15666

Phone: 724-610-5952
Email: ppaofpa@ppaofpa.org

Affidavit Required for Sponsored Membership

As a member of PPA of PA, Inc. in good standing (I have been a member for at least one year and my dues are current), I wish to sponsor this applicant. I am familiar with his/her photography and business practices and I truly feel that he/she would be an asset to the Association. I understand that I may be interviewed about this applicant.

Sponsor (print name) _____
Sponsor's Signature _____
Sponsor's Phone _____

Code of Conduct

Upon being accepted into membership in the Professional Photographers' Association of Pennsylvania, Inc., I hereby subscribe without reservation to this Code of Conduct, and do solemnly agree that I will:

1. Strive at all times to upgrade and improve my knowledge and skill of professional photography, marketing, and related areas.
2. In all dealings with users of photography and the general public:
 - a. Strive to present all photography and photographic services in surroundings and in a manner that reflects the highest levels of professionalism.
 - b. Deal with all users of photography and the general public with honesty and integrity.
 - c. Not use any marketing or competitive practice which violates any Federal Trade Commission or State Regulatory Agency rule or regulation, Federal or State statute, or any decision of any Federal or State Court.
 - d. Strive at all times to produce photography and photographic services in accordance with the highest levels of professionalism.
3. In all dealings with fellow professional photographers and members of this Association, share the knowledge and skill of professional photography.
4. Support efforts for and assist in the education of all interested persons and the general public in the art and science of photography.
5. In all matters relating to the interpretation of this Code, I will recognize the authority of the Professional Photographers' Association of Pennsylvania, Inc.

I have answered all questions to the best of my knowledge and agree that if I am accepted as a member of the Professional Photographers' Association of Pennsylvania, Inc., that I will subscribe to the Association's Code of Conduct.

Applicant's Signature _____
Date _____

Agreement and Certification

This completed and signed application should be sent, together with a fully completed Membership Information Questionnaire and your dues check to the Assistant Treasurer whose name and address appear herein.

Your application will be reviewed by the Screening and Ethics Committee and your name will be published in two consecutive issues of the Association Newsletter. Upon approval, you will be notified by letter of acceptance as a member of PPA of PA, Inc.. Should you wish to attend a meeting(s) before acceptance into the Association has been granted, you may do so as a "candidate for membership."

You have the right to appeal any decision made by the Board of Review concerning the rejection of your application by notifying the board of your intention to appeal and attending the next scheduled Board of Governors meeting following the decision.

No other benefits are granted until membership is approved.

If your application for membership is not accepted, your membership dues will be refunded if you have not registered for an annual convention, or as determined by the Board of Governors.

PPA of PA, Inc. disclaims all responsibility for any loss or damage to your equipment, prints, etc., while you are attending any meeting, seminar, or convention.

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 _____



Professional Photographers' Association of Pennsylvania, Inc. Membership Information Questionnaire

New applicant, furnish all information – Renewal member, furnish only changed information.

Business Name: _____

Check one:

Bus. Address: _____

ORIGINAL, as Part 2 of Membership Application dated: _____

City/State/Zip: _____

Bus. Phone: (____) _____ Cell Phone: (____) _____

Bus. FAX Nbr. (____) _____

Bus. E-mail: _____

UPDATE, changed or additional information as of (date): _____

Bus. Web Site: _____

Federal EIN Nbr. ____-____ Sales Tax Nbr. _____

Type of Bus. / Specialty: _____

Member Category (circle): Firm Supporting Associate Student Inactive

PPA of PA Mbr. Nbr. _____

Designated principal (voting) representative: _____

Owner: (or principal representative)

Partner:

Name: _____

Name: _____

Business Title: _____

Business Title: _____

Home Address: _____

Home Address: _____

Home City/State/Zip: _____

Home City/State/Zip: _____

Home Phone: (____) _____

Home Phone: (____) _____

Cell Phone: (____) _____

Cell Phone: (____) _____

Emergency Phone: (see note 3) (____) _____

Emergency Phone: (see note 3) (____) _____

Personal E-mail: _____

Personal E-mail: _____

Newsletter & Correspondence (see note 1) Yes No

Newsletter & Correspondence (see note 1) Yes No

Name Badge required: (see note 2) Yes No

Name Badge required: (see note 2) Yes No

If PPA (Nat'l) member, Member Nbr.: _____

If PPA (Nat'l) member, Member Nbr.: _____

Degree(s) & Date Rec'd.: _____

Degree(s) & Date Rec'd.: _____

Certification & Date Rec'd.: _____

Certification & Date Rec'd.: _____

Former PPA of PA member? Yes No

Former PPA of PA member? Yes No

If Yes, furnish additional information on back of form.

If Yes, furnish additional information on back of form.

If married, Spouse Name: _____

If married, Spouse Name: _____

Is spouse employed in the business? Yes No

Is spouse employed in the business? Yes No

Name Badge required: (see note 2) Yes No

Name Badge required: (see note 2) Yes No

If PPA (Nat'l) member, Member Nbr.: _____

If PPA (Nat'l) member, Member Nbr.: _____

Degree(s) & Date Rec'd.: _____

Degree(s) & Date Rec'd.: _____

Certification & Date Rec'd.: _____

Certification & Date Rec'd.: _____

Former PPA of PA member? Yes No

Former PPA of PA member? Yes No

If Yes, furnish additional information on back of form.

If Yes, furnish additional information on back of form.

Do you have children under 18 years of age who are not full-time employees of the business that will attend meetings and convention? Yes No If yes, furnish names on back.

Do you have children under 18 years of age who are not full-time employees of the business that will attend meetings and convention? Yes No If yes, furnish names on back.

Firm and Supporting Member Applicants:

Do you have full-time employees (see below) who will attend meetings or convention? Yes No If yes, list on back of form.

A full-time employee is one who works at your studio or business a sufficient time each week to require reporting his/her wages and withholdings to the Internal Revenue Service. A sub-contract photographer is not considered a full-time employee.

Firm members are assessed \$20 for each listed employee – list **only** employees that will attend meetings or convention.

Supporting members may list employees at no additional charge. A name badge may be requested for each listed employee.

Full-time Employee:

Name: _____
Business Title: _____
Home Address: _____
Home City/State/Zip: _____
Home Phone: (____) _____
Cell Phone: (____) _____
Emergency Phone: (see note 3) (____) _____
Personal E-mail: _____
Newsletter & Correspondence (see note 1) Yes No
Name Badge required: (see note 2) Yes No
If PPA (Nat'l) member, Member Nbr.: _____
Degree(s) & Date Rec'd.: _____
Certification & Date Rec'd.: _____
Former PPA of PA member? Yes No
If Yes, furnish additional information below.

Full-time Employee:

Name: _____
Business Title: _____
Home Address: _____
Home City/State/Zip: _____
Home Phone: (____) _____
Cell Phone: (____) _____
Emergency Phone: (see note 3) (____) _____
Personal E-mail: _____
Newsletter & Correspondence (see note 1) Yes No
Name Badge required: (see note 2) Yes No
If PPA (Nat'l) member, Member Nbr.: _____
Degree(s) & Date Rec'd.: _____
Certification & Date Rec'd.: _____
Former PPA of PA member? Yes No
If Yes, furnish additional information below.

Full-time Employee:

Name: _____
Business Title: _____
Home Address: _____
Home City/State/Zip: _____
Home Phone: (____) _____
Cell Phone: (____) _____
Emergency Phone: (see note 3) (____) _____
Personal E-mail: _____
Newsletter & Correspondence (see note 1) Yes No
Name Badge required: (see note 2) Yes No
If PPA (Nat'l) member, Member Nbr.: _____
Degree(s) & Date Rec'd.: _____
Certification & Date Rec'd.: _____
Former PPA of PA member? Yes No
If Yes, furnish additional information below.

Full-time Employee:

Name: _____
Business Title: _____
Home Address: _____
Home City/State/Zip: _____
Home Phone: (____) _____
Cell Phone: (____) _____
Emergency Phone: (see note 3) (____) _____
Personal E-mail: _____
Newsletter & Correspondence (see note 1) Yes No
Name Badge required: (see note 2) Yes No
If PPA (Nat'l) member, Member Nbr.: _____
Degree(s) & Date Rec'd.: _____
Certification & Date Rec'd.: _____
Former PPA of PA member? Yes No
If Yes, furnish additional information below.

Children of Owner(s)/Spouse(s): List only children under 18 years of age who are not full-time employees of the business that will attend meetings or convention. A name badge will be provided.

Name: _____ Age: ____ Parents: _____
Name: _____ Age: ____ Parents: _____
Name: _____ Age: ____ Parents: _____

Additional Information for Former Members of PPA of PA.

Name	Year Joined	Year Drop'd	Bd. of Dir. Position & Year	Chairperson Committee & Year	Awards (Year Received)		
					PA Award	PA Degree	Nat'l Awd
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

Notes:

- 1 - The **PPA of PA Newsletter** and other essential correspondence may be E-mailed to the owner, partner, and employees of the business at the listed PERSONAL E-mail address. Check "No" if you do not wish to receive this information.
- 2 - Request a **Name Badge** only if that person will be attending Association meetings or the Annual Convention.
- 3 - The **Emergency Phone** is a number to call in case of medical emergency while attending an Association meeting.