Central Highlands Imaging & Photographic Association Inc. (CHiPA)
Unit 2 / 12 Aubrey Street, Wendouree, Victoria, 3355
0419135454 secretary.chipa@gmail.com
ABN 95 774 234 902

MEMBERSHIP APPLICATION

Family Name:_____ **Given Name:**_____

Street Address:_____

Suburb:_____ **State:**_____ **Postcode:**_____

Telephone:_____ **Mobile:**_____

Email Address:_____

Emergency Contact:_____ **Emergency Phone:**_____

The purposes of the Association are:

- To advance the art of photography and imaging, embracing all photographic mediums at all levels of skill and encourage, support, promote and assist in the making of photographs by members of the Association.
- To provide sensitive critique in a non-competitive and competitive environment and to conduct on a regular basis, photographic competitions between members of the Association and between the Association and other like-minded bodies.
- To conduct lectures, presentations and workshops on photography, imaging and associated subjects and to conduct or participate in exhibitions of members' photography for the wider community.
- To collect, collate and distribute information on photography and imaging to members of the Association and the wider community and to provide a welcoming environment where members of the Association and visitors can socialise and improve their photographic skills.
- To conduct and or participate in group outings for the purpose of developing and maintaining positive rapport with the members of the Association whilst providing ongoing support and encouragement with respect to photography and imaging related matters.

I support the Association's purposes and agree to be bound by the Association rules (a copy of which can be obtained from the Secretary)

Signed:_____ **Date:** / /20

I wish to learn about:

☐ Using manual camera settings ☐ Advanced camera settings ☐ Flash Photography

☐ Studio Lighting ☐ Image manipulation in Photoshop ☐ Other software ☐ Tabletop Photography

☐ Portrait Photography ☐ Landscape Photography ☐ Other_____

I am an experienced photographer and would be willing to: ☐ Teach my skills to others

☐ Mentor less experienced members

Fees at 1st Jan 2019: Joining Fee (once only) $25 Annual Membership $25 Total $50

Family $100 children under 15 free Single Parent $50 children under 15 free

Payment: ☐ **Cheque** ☐ **Cash** ☐ **EFT-** Bendigo Bank, BSB- 633 000, Account Number- 151288511

Please Note: Membership renewals have a grace period of 12 months, any renewal outside this period will require Joining Fee and Annual Membership fee as stated above.

Office Use Only:

Fees received / / Membership Approved by Committee / /

Added to Membership Register / / Membership Number Assigned_____