

PRINT THIS IFPO MEMBERSHIP FORM

Name _____

(opt)business name _____

Address _____

City/State(prov.) _____

ZIP/Country _____

Phone/Fax _____

Email _____

Payment Method(check one):check/M.O. _____ Credit Card _____

Credit Card# _____

Expiration Date: _____ signature _____

Circle One: Visa, Mastercard, American-Express

.....(optional questionnaire to help us serve members).....

WHICH DESCRIBES YOUR PHOTOGRAPHY(check one)?

- I am a beginner. I am an advanced amateur
 I am a part-time professional I am a full-time professional

I WANT TO GAIN ACCESS WITH MY CAMERA TO:

- Sports Crime scenes. Concerts. Fire scenes. Breaking news.
 Press conferences. Celebrity events. Entertainment events.

CHECK EACH AREA THAT INTERESTS YOU STRONGLY:

- Press photography. Sports Nature/wildlife. Travel
 Videography Glamour. Commercial. Wedding. Portrait

ARE YOU AVAILABLE FOR PHOTO ASSIGNMENTS? YES. NO.

MEMBERSHIP DUES- \$ 74.00 -Lifetime IFPO Membership & Today's Photographer Subscription

SHIPPING.....\$ 7.00 -Membership Package Shipping and Handling

TOTAL AMOUNT.....\$ 81.00 -ENCLOSED

Mail to: IFPO Membership Dept. PO Box 42, Hamptonville, NC 27020-0042 USA
or Fax to: (using a Credit Card) 1-336-468-1899