## WINNIPEG SOUTH PHOTO CLUB INC.



## **Application for Membership**

Membership Type	Student \$30	Single \$50	Family* \$80
New Member?	Yes	* family memb	er(s) who reside at the same address
If you are a new men	nber, please let us know ho	w you heard about W	SPC:
From a member	From a friend F	rom the WSPC websi	te
From an Info Card see	en at a camera store	_ Other (please list)	<del></del>
Payment Method E-transfer to <u>wspc.treasurer@gmail.com</u>			
	Cash	Cheque	
Applicant			
		Email:	
Address:			
Res Ph:	Work Ph:	Cell	Ph:
Second Applicant (if a	opplicable):		
· · · · · · · · · · · · · · · · · · ·	Email:		
Res Ph:	Work Ph:	Cell	Ph:
may be exposed to certain known of performing whatever physical for any personal injury, death, loresult of my participation. In continuous executors, administrators and asservants, agents and Field Trip/Nof action, costs, expenses or deministrators and release shall be bind read, understood and accepted to the signing below, I acknowledge of the signing below.	by participating in Winnipeg Sout on and unknown risks, dangers, h I exercise or activity that is requi- posses, inconvenience or property insideration of the WSPC accepting ssigns, hereby release, indemnify Workshop leaders and each of the mands and all liability whatsoeve ling on me, my heirs, executors, a the above conditions.	red of me. I freely accept damage that may arise from my application for men and hold harmless WSPC eir heirs, executors, admin arising or that may arise administrators and assigns	trips, workshops and other activities, I firm that I am in good health and capable and fully assume any legal responsibility om such risks, dangers and hazards as an bership, I, on behalf of myself, my heirs, its officers, directors, employees, nistrators as assigns from any claim, cause as a result of my participation. This is. By signing below, I confirm that I have and agree to abide by its terms.
of-Conduct.pdf			
Signature:	Sign	nature:	
Date:	Dat	e:	