

$Park\ West\ Camera\ Club$

<www.parkwestcameraclub.org>
<pwccny@aol.com> and <pwccny@gmail.com>

Membership Application

Name	Date/
Street Address	Apt. #
City, State	Zip
Home # () Mobile # ()
Email:	Birthday Month:
	<u>PAYMENTS</u>
	Date Paid Amount Paid
Camera Club	Dues: \$60
While the club is meeting on Zoom, please mail your completed application and payment to Park West Camera Club, c/o Schonbrun, 315 Riverside Drive, Apt. 5E, New York, N.Y. 10025	
	Committees
Please select which Committee(s) you may be interested in serving on:	
() Competition	on () Gallery () Program () Website
() Membersh	nip () Photo Notes () Workshop
How did yo	ou first learn of Park West Camera Club?
() PWCC on	Instagram () PWCC on Facebook () Expanding Visions
() Google Se	arch () Current or Former Members
() Other	(please specify)