



2025/2026 Membership Form

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|-----------------------------|----------|
| Full name: | |
| Are you over the age of 18? | Yes / No |
| Address: (Optional) | |
| Postcode: (Optional) | |
| Phone Number: | |
| E-mail address: | |

Do you agree to being a member of the WPC WhatsApp Group? Yes / No

How may we contact you? (Please tick those that apply). Would you prefer to be contacted by ...

WhatsApp? E-mail? Phone? Text message?

Emergency contact details: Name: _____ Relationship: _____

Phone number: _____

Some information about your photographic interests please:

Experience level: Just starting / Intermediate / Advanced.

Equipment used etc:

Camera brand / model:

Digital, film or both:

Computer brand:

Photo Software:

Do you use your phone for photography? Yes / No. If 'Yes', what make/type of phone do you use?

Which type of photography interests you? (Please tick the subjects that you are interested in). All?

Astrophotography? Fine Art photography? Floral? Landscapes? Learning new skills?

Marine? Portraiture & people? Sports? Street? Travel?

Using photo-processing software? Workshops? Wildlife? Other?

Agreement: I hereby agree to abide by the rules and regulations of Wilmslow Photography Club. I understand that my membership may be revoked if I fail to comply with these rules.

Signature: _____

Date: _____