



# Professional Photographers of North Central Florida

## New Member / Member Renewal Application

NAME	
BUSINESS NAME	
BUSINESS ADDRESS	
CITY/STATE/ZIP	
BUSINESS#	FAX#
CELLULAR#	HOME#
EMAIL	
WEBSITE	
FPP MEMBER CATEGORY: <input type="checkbox"/> YES <input type="checkbox"/> NO	PPA MEMBER #
(All Professional members of PPNCF must be members of FPP in order to maintain FPP chapter affiliation after their first year; it is recommended that any member maintain an active PPA membership.)	
PHOTOGRAPHIC DEGREES	
PHOTOGRAPHIC SPECIALTIES	

**Code of Ethics**

1. I will endeavor to enhance and ennoble the status of the photographic profession by maintaining a dignity of manner in my behavior, in the presentation of my photography and photographic services, in the appearance of my studio or place of business and in all other forms of public contact.
2. I will observe the highest standard of honesty in all my transactions, avoiding the use of false titles, confusing or inaccurate technical terms or descriptions and misleading terms or claims.
3. I will at all times endeavor to produce only those types of photographs and photographic services that will enhance the prestige of the profession, to apply my best efforts on behalf of the public, and to play my part in raising the general standard of photographic craftsmanship.
4. I will show a friendly spirit of cooperation with my fellow professional photographers and assist them whenever possible should they be in trouble or difficulty.
5. I will assist and give of my knowledge to the members of my profession, and will encourage them individually and collectively, so that the quality of photography may constantly be raised to higher standards.
6. In all matters relating to the interpretation of this code I will recognize the authority of the Professional Photographers of North Central FL, Inc., and agree to hold harmless the Board of Directors in any decision made on behalf of the corporation.
7. I understand and agree that my membership is contingent upon my maintaining membership in the Florida Professional Photographers (FPP).

### MEMBERSHIP CATEGORIES AND ANNUAL DUES

Florida Residents only (exception Student, Service, Retired, Life) and of Legal Age (18)

**MEMBERSHIP DUES grant entry to all PPNCF Regular Section and Salon Meetings.**

- \$160 **PROFESSIONAL**  
An individual who derives the major portion of their income from photographic activities.
  - \$135 **ASSOCIATE**  
An individual whose spouse/employer is a PPNCF Professional Member.
  - \$135 **ASPIRING**  
An individual who aspires to be a full-time professional photographer.  
Membership valid for the Membership Year and may be renewed by Board approval.
  - \$115 **STUDENT**  
An individual who is enrolled at any recognized school of photography.  
Requires proof of enrollment.
- I certify that I am a  **LIFE** MEMBER of the PPNCF. (Board Approval Required)  
 **RETIRED** LIFE/RETIRED Members do not pay membership dues.
- \$150 **SERVICE:** (Individual or Firm): Companies or their employees who offer products or services to professional photographers.  
Advertisement space will be applied to the PPNCF Newsletter and Web-Site  
Use of PPNCF Name/Logo is allowed only to show PPNCF Section support

I have read the above Code of Ethics and agree to abide by them, evidenced by my signature this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

Any member of the Professional Photographers of North Central FL, Inc., may be reprimanded, suspended, or expelled by the Board of Directors for a violation of the Code of Ethics or the Bylaws.

\_\_\_\_\_  
Signature

Name Tag \$10.00 each

Select backing:  Magnetic  
 Pin  
 Clip-on

PRINT Name & Business Name Below

This application must be completed in full and accompanied with all fees and a copy of **The State of Florida Sales Tax Registration Certificate** (except Associate, Aspiring, Student, Life, & Retired) prior to being considered for membership.

The Board may interpret or make exceptions as needed.

PPNCF Office Use Only

Ck# \_\_\_\_\_  
 CC# \_\_\_\_\_  
 Exp \_\_\_\_\_ Code \_\_\_\_\_

I elect my account to be charged in 4 quarterly installments  
 Acceptance of this election entitles the PPNCF to charge your CC account on the 15<sup>th</sup> of the month.  
 A \$12 convenience fee is applied to the total amount due. NSF Returns are charged a \$25 fee.

**Please make checks payable to: PPNCF**

Send to: **PPNCF**  
**PO Box 140803**  
**Gainesville, FL 32614-0803**