



# 2024 Camera Guild Membership Application

**RCSC PHOTO ID required** for application acceptance (no key fobs).

**Dues:** \$20 for Primary Club Member, \$5 for Household Member (must reside at same address)

**Application for:** New Member(s) \_\_\_\_\_ or Renewing Member(s) \_\_\_\_\_

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**PRINT CLEARLY** (Names must be the same as shown on your RCSC cards)

**PRIMARY CLUB MEMBER**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_ Zip \_\_\_\_\_

RCSC # \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Phone \_\_\_\_\_

**HOUSEHOLD MEMBER** (must reside at same address)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_ Zip \_\_\_\_\_

RCSC # \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Phone \_\_\_\_\_

**By Signing This Application I(we) Agree To Monitor At Least Twice Each Year.**

Primary Club Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Household Member Signature \_\_\_\_\_ Date \_\_\_\_\_

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**FOR OFFICE USE ONLY** (original application and money to Treasurer)

1 - RCSC Card INFORMATION VERIFIED (by/date) \_\_\_\_\_

2 - Payment Received: Cash \$ \_\_\_\_\_ Check \$ \_\_\_\_\_ # \_\_\_\_\_ (by/date) \_\_\_\_\_

3 - Membership Card(s) Printed (by/date): \_\_\_\_\_

4 - Data Entry Complete (by/date) \_\_\_\_\_