



PPWV Membership Application

IMPORTANT! BOTH SIDES of the form must be completed in full and returned with dues payment before this application can be reviewed and processed. Applications must be received by January 31st for applicant to be eligible to compete in that year's print competition!

Requested Membership Status:

INDIVIDUAL MEMBERSHIP.....\$95 each

(1 or 2 members from same business—
may be spouse, family or bonafide employee)

- In State
- Out of State

GROUP MEMBERSHIP.....\$250

(3 or more members from same business—
may be spouse, family or bonafide employees)

- In State
- Out of State

First Name _____ MI _____ Last Name _____
(if applying for more than one Individual Membership, or a Group Membership, please enter the owner/primary name here)

Studio/Business Name _____ Title/Position _____

Business Address _____ City _____ State _____ Zip _____

Business Phone () _____ Fax () _____

Email _____ Website _____

Type of Business: Portrait/Wedding Commercial/Indust. Media Service (Lab/Supplier)

Percentage of income derived from photography 25% 50% 75% 100%

How did you hear about PPWV? _____

PPWV Sponsor/Studio _____

Federal or State Tax Identification # _____
(this is REQUIRED for PPWV Membership)

PPA Member? yes no PPA Membership # _____

PPA Achievement Record: PPA Certified Craftsman Master Other _____

Additional Members:

First Name _____ MI _____ Last Name _____

spouse employee E-mail _____

PPA Member? yes no PPA Membership # _____

PPA Achievement Record: PPA Certified Craftsman Master Other _____

First Name _____ MI _____ Last Name _____

spouse employee E-mail _____

PPA Member? yes no PPA Membership # _____

PPA Achievement Record: PPA Certified Craftsman Master Other _____

First Name _____ MI _____ Last Name _____

spouse employee E-mail _____

PPA Member? yes no PPA Membership # _____

PPA Achievement Record: PPA Certified Craftsman Master Other _____

First Name _____ MI _____ Last Name _____

spouse employee E-mail _____

PPA Member? yes no PPA Membership # _____

PPA Achievement Record: PPA Certified Craftsman Master Other _____

(see other side)

PROFESSIONAL PHOTOGRAPHERS OF WEST VIRGINIA

Code of Conduct

I do hereby make application for membership in the Professional Photographers of West Virginia, Inc. In the event of cancellation or lapse of membership, I agree to discontinue immediately the use of the Association's name, emblem and trademarks.

I, upon acceptance into membership in the Professional Photographers of West Virginia, will hereby subscribe without reservation to this Code of Conduct, and do solemnly agree that:

- 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.
- 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.
- 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 in behalf of the public, and to play my part in raising the general standard of photographic craftsmanship.
- 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.
- I will at all times avoid the use of unfair competitive practices.
- 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.

In witness whereof I hereto affix my signature this _____ day of _____
in the year _____.



signature of applicant(s)

Make checks payable to PPWV and mail completed form and payment to:
Mary Ann Phillips, Executive Secretary
Professional Photographers of West Virginia
1497 Eastern Avenue
Morgantown, WV 26505-2346
(304) 599-3840

<i>For Official Use Only:</i>	
Received App	____/____/____
Received Dues	____/____/____
<input type="checkbox"/> Cash	<input type="checkbox"/> Money Order
<input type="checkbox"/> Check #	_____
Amount received \$	_____
Board Referral	____/____/____
Accepted	____/____/____
Notified	____/____/____