



Westchester Photographic Society, Inc.

Please print clearly! This is your contact information!

Date: _____

Name: _____

Address: _____

Phone: _____

Email: _____

How did you hear of us? _____

Type of membership (All memberships expire on August 31st):

New Individual (\$25 discount and prorated based on today's date):

Sep-Nov: \$60

Dec-Feb: \$45

Mar-May: \$30

Jun-Aug: \$60 (through following Sep)

New Family: \$75

Renewal (Individual): \$85

Renewal (Family): \$100

Mail completed application and your check payable to **Westchester Photographic Society** or **WPS** to:

Westchester Photographic Society
P. O. Box 405
Ossining, NY 10562

Note: Online payment preferred. See <https://www.wpsphoto.org/join-us>