



CAMERA CLUB  
of BREVARD

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# Camera Club of Brevard New Member Information

\_\_\_\_ *Single*    \_\_\_\_ *Family*

***Please print all information***

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

Phone Numbers (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
(Preferred contact number) (Other number)

City: \_\_\_\_\_ State: \_\_\_\_\_

Email Address: \_\_\_\_\_  
Please print email address clearly

Family Members:

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

Email Address: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

How did you hear about the club? \_\_\_\_\_

Essential Camera Club communication is done through email. If you do not start receiving email communications (e.g., programs, field trips and workshops information), please check with us to ensure we have your correct email address. If additional space is needed, use the other side of this form. Please bring this form and your check or cash to a club meeting or mail this form and a check to the address below.

*Camera Club of Brevard Mailing Address:*  
**Camera Club of Brevard P. O. Box 542 Melbourne, FL 32902**

For Additional Information Please Contact:  
**info@ccbrevard.com**

*The information you provided will only be used by members of the Camera Club of Brevard.*