



RANDBURG PHOTO CLUB

Membership Application

YEAR

1 July 2025 - 30 June 2026

TYPE OF MEMBERSHIP APPLIED FOR
(Indicate with an X)

FAMILY

INDIVIDUAL

SCHOLAR

NAME & SURNAME

POSTAL ADDRESS

TELEPHONE NUMBERS

HOME:

MOBILE:

OTHER:

BIRTHDAY

DAY

MONTH

E-MAIL ADDRESS:

PREVIOUS/CURRENT
PHOTOGRAPHIC CLUB
MEMBERSHIP INCLUDING
DATES

STAR GRADING ACHIEVED

MEMBERSHIP OF PSSA

YES

NO

PSSA NUMBER:

PSSA HONOURS

EPSSA

APSSA

LPSSA

FPSSA

OTHER:

I am conversant with the Randburg Photo Club's Rules.

SIGNATURE

DATE

CLUB FEES

Individual member **R450**

FAMILY MEMBER (PER MEMBER) **R375**

Scholar **R375**

*Applicants should forward proof of EFT together with the completed application form to:
Club Secretary: randphotoclubinsta@gmail.com*

BANKING DETAILS:

Account name: RANDBURG PHOTO CLUB

NEDBANK, Cresta Branch, Branch Code 191305

Account Number: 2003666915 Saving account

Please use your name as ref on your payment eg. Jim Smith