



PPA's Mission: *Creating a vibrant community of successful professional photographers by providing education, resources and industry standards of excellence.*

Membership Application for Canadian residents

CANADIAN - Canadian Members can be covered by PPA's Malpractice Protection Program - the Indemnification Trust. The Trust is required for members with a Portrait or Wedding Classification. Canadian Members who select Portrait or Wedding Classifications are automatically included in the Trust (an additional \$50). The Indemnification Trust is PPA's Malpractice Protection Program, which protects you from allegations of photographer negligence during an assignment. For complete information, please call PPA's Member Value and Experience Department.

Name _____

Studio/Company Name _____

Address *(Please print your regular mailing address as it should appear for mail delivery.)*

Check here if you do not wish to receive information via mail from industry companies.

Check here if you do not wish to receive information via e-mail on new products and services from carefully screened third parties.

Phone _____ FAX _____ E-mail _____

Male Female Date of birth _____ Web site _____

1. Payment Options - NOTE: INDEMNIFICATION TRUST COVERAGE REQUIRED FOR MEMBERS WITH A PORTRAIT OR WEDDING SPECIALTY CLASSIFICATION.

Monthly payment option (NO DEBIT CARDS)

12 payments of \$19.34 US
Includes Indemnification Trust coverage

12 payments of \$15.17 US
No Indemnification Trust coverage

Full payment option

Includes Indemnification Trust coverage \$220 US

No Indemnification Trust coverage \$170 US

2. Specialty Classifications. Tell us what you do. Please use the list of Specialty Classifications on the next page. There is no limit to the number of classifications that you may list.

3. Demographic Information (BPA) - Please select from the list on the next page.

Your Organization Your Title

Payment (U.S. funds). Your signature indicates your agreement to abide by the PPA Code of Ethics.

TOTAL DUES Visa MasterCard AMEX Check made out to PPA

Account number _____ Exp. date _____

Name on card _____ Signature _____

Your signature indicates your agreement to abide by the PPA Code of Ethics.

PPA Code of Ethics

I, as a requirement for admission to and retention of membership and participation in Professional Photographers of America, Inc., agree to strive at all times to upgrade and improve my knowledge and skill of professional photography, marketing and related areas. In all my dealings with users of photography and the general public, I will: Strive to present all photographic services in surroundings and in a manner which reflects the highest levels of professionalism. 2. Use the highest levels of honesty, professionalism and integrity. 3. Not use any marketing or competitive practice which violates any Federal Trade Commission, or other Federal or State regulatory agency rule or regulation, or Federal or State statute or any decision of any Federal or State Court. 4. In all dealings with fellow professional photographers, students and others who aspire to be professional photographers, I shall share the knowledge and skill of professional photography. 5. Support efforts for and assist in the education of all interested persons and the general public in the art and science of professional photography.

Specialty Classifications. What kind of photography do you do? Use the following codes to complete the Specialty Classification section.

AG	Art Tech
CAE	Aerial Photography
CAR	Architectural
CG	Commercial
CID	Industrial
CL	Evidence & Legal Photography
DG	Digital Imaging
EG	Educator
FA	Fine Arts
FCG	Freelance
NA	Nature Photography
PA	Panoramic
PG	Portraiture
PHS	High School Seniors
SG	Stock Photography
SPE	Special Events
SPG	Sports Photography
VG	Video Production
WG	Weddings
WV	Wedding Video

Demographic Information (BPA) Please select ONE that best describes your primary photographic activity:

- Portrait Photography (Incl. Families, Children/Infants, Seniors, Headshots, Maternity, Pets, etc.)
- Wedding and/or Special Events Photography
- Commercial Photography
- Aspiring Photographer
- Fine Art Photography
- Other Type of Photography (Please Specify) _____
- Business/Industrial Firm with In-House Photo Dept
- Photo Lab/Lab Services/Finishers/Retouchers
- Distributor/Manufacturer
- Press/Media/Ad Agency/Stock House Photo
- Education/Student
- Other Photographic Activity Not Listed Above (Please Specify)

Please select ONE that best describes your job title:

- Owner/Co-Owner
- Photo Studio Manager
- Corp. Manager (Pres, VP, Dir, Mgr, etc.)
- Staff Photographer
- Photographer/Freelance
- Media/Creative/Production/Technical/Support Staff/
- Educator/Student
- Other Job Title Not Listed Above _____

\$17.50 of your dues is applied to *Professional Photographer* magazine and is not deductible from dues. Members receive both the print and digital version of the magazine each month. Payments or contributions to Professional Photographers of America, Inc., are not deductible as charitable contributions for Income Tax purposes. Payments may be deductible as an ordinary and necessary business expense if you are in a photography related business. Please consult your own tax advisor. Submission of this application indicates your agreement to follow and abide by the policies and procedures and the Code of Ethics of the Professional Photographers of America. Membership commences upon receipt of payment and is for one year. Dues subject to change.

Information for Monthly Credit Card Option Applicants: By submitting a monthly credit card option application, I understand that PPA will charge my credit card monthly. I understand that I will pay an additional \$1.00 per month for bank processing fees included in the dues amounts in this application. The monthly charge will appear on my credit card statements as Professional Photographers of America and the statement will act as a receipt. PPA will notify me of any dues or membership changes and will automatically renew my membership. I can at any time resign from PPA and stop charges being made to my credit card. Any payments made prior to that are nonrefundable. A resignation must be received in writing, fax or e-mail. E-mailed resignation must come from the e-mail address contained in the member's record, include their name and PPA ID number. I agree to inform PPA of any changes made to my credit card, such as a change in my account number. If PPA is unable to successfully make a charge to my credit card, PPA will contact me to make any changes or corrections to my record. If PPA is unable to successfully process my monthly payment, my membership will be considered void, and I am required to pay the balance in full to reinstate my membership. PPA is not responsible for any overdraft or bank fees charged to the member if a debit card is used for membership dues payments.