



Professional Photographers of America

Community Network Annual Meeting Merit Request Form

Community Network Name: _____

Community Network Event Date(s): _____

Community Network Meeting Name: _____

Contact Person: _____

Email: merits@ppa.com

Mail: PPA - MERITS
229 Peachtree St. NE, Suite 2300
Atlanta, GA 30303

Address: _____

City, State, Zip: _____

Phone: _____

E-mail: _____

Community Networks may host 1 annual event from their unlimited merit allotment each year. These merits will not be deducted from your merit allotment.

Community Networks may award each PPA member a maximum of four merits total per calendar year, two of which can be speaking merits. This does not apply to PPA Merit Program merits/attendee merits.

SPEAKER: 2 Speaking Merits each (Merit code: 226)

Name	PPA ID #
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

PRESIDENT: 2 Service Merits annually (Merit code: 230) President is ineligible for merits other than for service as President, attendee merits, and merits for participation in a PPA Merit Program.

Name	PPA ID #	Date of Last Day in Office
_____	_____	_____

CONVENTION CHAIRMAN: 2 Service Merits (Merit code: 236) *In the case of co-chairmanship of a meeting or seminar, chairmen may take one merit each for a total of no more than two merits.*

Name	PPA ID #
_____	_____
_____	_____

PROGRAM PANEL PARTICIPANT: 1 Speaking Merit (Merit code: 239) (Maximum of one merit per meeting)

Name

PPA ID #

PHOTOGRAPHIC COMPETITION CHAIRMAN: 2 Service Merits each (Merit code: 275)

Name

PPA ID #

JURY CHAIRMAN: 2 Service Merits each (Merit code: 331)

Name

PPA ID #

JURORS: 2 Service Merits each (Merit code: 234)

Name

PPA ID #

Attendee (PPA Merit Program): 1 Service Merit each (Merit code: 377)

- Yes, I held an approved PPA Merit Program and will email the attendee roster to **merits@ppa.com**. Roster should be in Excel and include: first name, last name, email and PPA ID number
- No, I did not hold a PPA Merit Program.

Method of Payment:

- Visa Mastercard AMEX Check Pay by phone

Card Number _____

Exp. Date _____

Name on Card _____

Signature _____

\$10 per attendee. No cost for instructors. Merits awarded are not deducted from the sponsoring Community Network merit allotment.

PPA will notify you of the final amount due before payment is processed.