



# Fort Dearborn - Chicago Photo Forum

Dearborn Station, 47 West Polk Street M-7

Chicago, Illinois 60605 (312) 922-0770 [www.chicagophotoforum.org](http://www.chicagophotoforum.org)

## APPLICATION FOR MEMBERSHIP

NAME \_\_\_\_\_  
(First) (Middle) (Last)

ADDRESS \_\_\_\_\_  
(Street) (City) (State) (ZIP)

EMPLOYED BY: \_\_\_\_\_

Business Address: \_\_\_\_\_  
(Street) (City) (State) (ZIP)

PREFERRED ADDRESS FOR FORUM MAILING LIST:  
\_\_\_\_\_

PHONE: Home \_\_\_\_\_ Business \_\_\_\_\_ E-Mail \_\_\_\_\_

I intend to use the following Forum facilities: Darkroom \_\_\_\_\_ Studio \_\_\_\_\_

Please List Professional Photography or Camera Club affiliations, past or present:  
\_\_\_\_\_

I have attended the following photographic school(s):  
\_\_\_\_\_

List in order of preference, committees you would be willing to work on:

(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

List two personal references (need not be photographically related):

\_\_\_\_\_  
(Name) (Address) (Phone Number)

\_\_\_\_\_  
(Name) (Address) (Phone Number)

If elected to membership, I agree to be governed by the Constitution, By-Laws and House Rules of the Ft. Dearborn-Chicago Photo Forum. I understand that it is my obligation to contact the Membership Chairman to schedule an interview to join the Forum. My obligations for dues shall continue until the Board of Directors has received my written notice of resignation from the Forum.

\_\_\_\_\_  
(Signature) (Date)

I attach my check to cover the following:

Initiation Fee	\$ 35.00	\$ _____
Dues	\$ 20.00	\$ _____
Darkroom/Studio (Facilities) Fee	\$ 25.00	\$ _____
Locker Fee (One Time – Darkroom/Studio Users Only)	\$ 20.00	\$ _____
TOTAL		\$ _____

Approved by Board of Directors \_\_\_\_\_  
(Date)