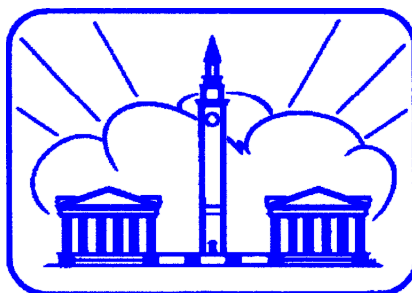


## ~ Springfield Photographic Society ~

The Springfield Photographic Society, **founded in 1937**, is a not-for-profit organization consisting of people, from the photographic novice to the professional, who share one thing in common, a love of photography. The group meets on the second and fourth Wednesday of each month from September through May to enjoy one another's company, discuss photographic techniques and engage in friendly intra-club competitions. These meetings are held at the Reed's Landing Community Room, 807 Wilbraham Road, Springfield, MA at 7:30PM.

The Club's activities include monthly programs, often of an instructional nature in a particular phase of photography and a monthly competition whereby members submit their own photographic work for critique and viewing by the other members. These programs are intended to entertain and/or educate our members in the art and science of photography. SPS is a member club of the New England Camera Club Council which, each July, hosts a three (3) day major photography event and conference at the University of Massachusetts in Amherst, MA.

The SPS is also affiliated with the (PSA), an international organization world. Guests are always welcome at although certain restrictions do apply



Photographic Society of America, which has affiliates throughout the our meetings. One does not have to attend the majority of our meetings to non members.

You are invited to check us out on our web site at:  
<http://sps37.tripod.com>

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### Springfield Photographic Society - Application for Membership

Please make your check payable to: Springfield Photographic Society  
Give to; or Mail to; David Mavlouganis, Treas.  
In A Flash, 477 Breckwood Blvd., Springfield, MA 01109

#### ANNUAL DUES

NAME: \_\_\_\_\_

\_\_\_\_\_ Individual @ \$25.00

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ Family @ \$30.00

CITY: \_\_\_\_\_

\_\_\_\_\_ Youth/Full Time Student\*  
@\$13.00

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ zip +4: \_\_\_\_\_

\* up to 21 years of age

PHONE: [H] \_\_\_\_\_ [W] \_\_\_\_\_

EMAIL: \_\_\_\_\_

BIRTH MONTH: \_\_\_\_\_ NEW MEMBER: \_\_\_\_\_ RENEWAL: \_\_\_\_\_

MEMBER SINCE: \_\_\_\_\_ PSA MEMBER: YES \_\_\_\_\_ NO \_\_\_\_\_