



ADVERTISING
PHOTOGRAPHERS
OF AMERICA

MEMBERSHIP APPLICATION

EDUCATOR

PLEASE PRINT LEGIBLY AND FILL IN ALL INFORMATION – APA SECURE FAX: 888-889-7190

Name _____ Title _____

Educational Institution _____

Address _____ City _____

State/Province _____ Zip/Postal code _____ Country _____

Signature** (Required) _____ Phone _____ Fax _____

Email* _____ Male Female

This application is for an **Educator** who is employed as an instructor either part or full time. (*Note: Professional photographers who also teach may join as Emerging or Professional Photographer Members, but not as Educator Members.*) Benefits include access to APA Business Manual, and the Members Only area of the APA website but does not include eligibility for the APAINSures Photographer insurance package.

Payment method \$75 Annual dues payment by check (enclosed)

OR \$75 Annual dues payment by:

Visa

Mastercard

American Express

Card number _____ Expiration date _____

Name on card _____ Card Holder Signature _____

Credit Card Billing Address (if different from above) _____

City _____ State _____ Zip _____

**Your signature indicates your agreement to abide by APA Code of Ethics & payment information on this application.

APA Code of Ethics

As a requirement for both admission and retention of my membership in APA, I acknowledge that my words, actions, and business practices reflect on all other members on the organization, and on the industry at large. Therefore I will endeavor to support APA in its mission to empower advertising photographers to achieve success, both individually and collectively. I will also strive to operate according to the highest professional standards, and will exercise responsibility, integrity, and honesty, treating peers, clients, and those under my authority with dignity and respect. I will also refrain from any marketing or competitive practice that 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.

**Email Privacy: APA respects your privacy and appreciates your cooperation to access maximum benefits and vendor discounts. APA relies on sponsorship programs to help keep membership dues to a minimum and to provide valuable member benefit opportunities. Sponsors may be given your email address to contact you, but only for an APA approved mailing related to sponsorship and benefits.*

If you are paying by credit card, please fax this signed form to our secure fax: 888.889.7190

Or you can USmail it with your check for the full annual dues amount to:

**ADVERTISING PHOTOGRAPHERS OF AMERICA
MEMBERSHIP DEPARTMENT
560 Fourth Street
San Francisco CA 94107**

Please allow 2-3 days from when we receive your application for processing; you will then receive a confirmation email with your APA National Member Identification number and passwords for access to your member benefits. APAinsures eligibility automatically begins when you receive your confirmation email. Your membership card will be sent within 4-6 weeks.

Thank you and welcome to the APA!

Jeff Kausch APA National Membership Representative membershiprep@APAnational.com 800.272.6264
