Membership Application – Assisting Photographer

Available tofull or freelance Assisting Photographers, who are working with current AOP Photographer Member(s)

**The standard cost of membership is £84.00 p.a. plus VAT**

As an Assisting Photographer to an AOP Accredited Photographer member - you are eligible for a **10% discount** on your membership fee each year – providing the AOP Accredited Photographer member who referred you is able to confirm you are still assisting them.

Please complete this form and email it to: membership@aophoto.co.uk.

You should include a passport-sized photo (jpeg), which we will place in your records and on your membership card.

Upon receipt of your application form, you will be sent an invoice for your first year’s subscription. Payment of this invoice will need to be made in full to activate your membership.

Applicant Details:

|  |  |
| --- | --- |
| Name: |  |
| Business name: |  |
| Address: |  |
| Post code: |  |
| Contact Telephone number: |  |
| Email address: |  |
| Your website:\* |  |
| Nationality: |  |
| Gender (male/female): |  |
| Date of birth: |  |
| The year you became an assisting photographer: |  |
| Photographic training:(Please use an “X” if applicable, or describe if *Other*) | College  | University  |
| Self-taught  | Assistant |
| Other  |
| Specialisations: |  |
| Reason for joining AOP: |  |

**Submission requirements:**

Please provide the name, email and number for 2 photographers you have assisted with so we can contact them for a reference:

**Reference 1**
Name:

Email:

Telephone number:

**Reference 2**Name:

Email:

Telephone number:

**OR**

Please provide the name and signature of the AOP Photographer Member who you assist on a full or part-time basis:

**AOP Accredited Photographer Name:**

**AOP Accredited Photographer membership number :**

**AOP Accredited Photographer signature:**

**Terms and conditions:**

I wish to apply for membership of the Association of Photographers (AOP) and agree to abide by the Articles of Association, the Code of Practice and the Members’ Charter, and will act at all times in accordance with the principles of professional and ethical conduct established therein (available <http://the-aop.org/about-us/members-charter>).

I understand that my membership is for a minimum period of 12 months, to be renewed annually thereafter and that payment for membership will be paid within 30 days of being invoiced for payment.

By joining the AOP I agree that I consent to allow the AOP to store and process information about me and my business and that I agree that the AOP may contact me on the legal bases of legitimate interests and under the contract of membership. I agree that I may withdraw my consent to receive marketing materials but that the AOP may continue to contact me about administrative matters.

If I wish to resign from the AOP, I will do so by writing to the Company Secretary and if I do so within 30 days of receiving my renewal invoice, I will not incur any additional costs, otherwise failure to do so will render me liable to pay the annual subscription in full.

If payment is not received within 90 days, membership will be terminated but without prejudice to such rights the AOP may have in respect of unpaid fees.

Please sign or enter your name in the signature field to show that you accept the terms and conditions.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The AOP will hold your personal data on its computer database. This information may be accessed, reviewed and used by the AOP for the purpose of running future events you may choose to enter or attend, and for market research. The AOP may also periodically send you information on events or marketing that may be of interest to you.

(Opt-in) If you are happy to receive such information, please tick here:

The AOP does not supply the contents of its databases to any third party.