

Society of Northern Ohio Professional Photographers

Each applicant shall answer all questions on Page 1 to the best of his or her ability, carefully read the Code of Ethics on Page 2, then sign the application on Page 2 and return with payment for the initial year's dues.

Applications containing blank spaces on Page 1, no signature on Page 2, or no payment, will be returned. Please type or print clearly.

Name _____ Birth Date _____
Month Day

Business Name _____

Address _____

City _____ State _____ Zip _____

Phone () _____ Fax () _____

Email _____ VENDOR'S LICENSE NO. _____

Website www. _____

Spouse's Name _____ Home Phone () _____

Principal Type of Business: _____

Income from Photography _____% Experience in Photography _____ years

Weddings _____% Portrait _____% Seniors _____% Commercial _____% Pets _____% Other _____%

Do you hold another job? _____ Where? _____

Photographic schools attended _____

Member of PPA? Yes No PPA# _____

(Circle Yes or No, and if Yes, **PLEASE INCLUDE YOUR NUMBER**)

Membership in other photographic organizations _____

Membership in Service or Civic Clubs _____

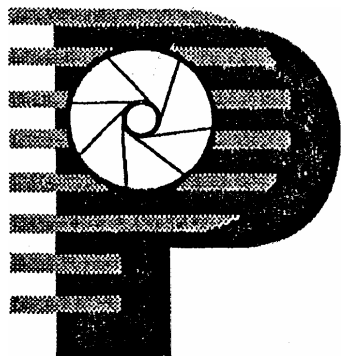
Reason for requesting membership in SONOPP? _____

Have you ever applied for or held membership in SONOPP before? _____ When? _____

Indicate Category of Membership Desired – (See definitions on Page 3 and circle only one)

Professional Employee Supplier Colorist/Retoucher Part-Time Student Retired

Code of Ethics



I do hereby apply for membership in the *Society of Northern Ohio Professional Photographers*, and as a condition of membership, do hereby subscribe without reservation to this Code of Ethics, and do solemnly agree that;

I will endeavor to enhance and ennoble the status of the photographic profession by maintaining a dignity of manner in our behavior, in the presentation of our photography and photographic services, in the appearance of our studios or place of business, and in all other forms of public conduct.

I will at all times endeavor to produce only those types of photographs and photographic services that will enhance the prestige of the profession, to apply our best efforts in behalf of the public, and to play our part in raising the general standard of photographic craftsmanship.

I will show a friendly spirit of cooperation with our professional fellow photographers and assist them, whenever possible, should they be in trouble or difficulty.

I will at all times avoid entering into any agreement of any nature whatsoever, the objective of which is to restrain trade, limit production, regulate prices or perform an action which is contrary to law.

I understand that all members of this *Society* shall be at all times at liberty, and in every respect, to conduct his or her business as he or she sees fit, provided in doing so the member does not violate the Code of Ethics or any provisions of the By-Laws of the *Society of Northern Ohio Professional Photographers*.

In all matters relating to the interpretation of this Code, I will recognize the authority of the *Society of Northern Ohio Professional Photographers*. At all times, avoid the unfair competitive practices as determined by any court of competent jurisdiction, the federal anti-trust laws and related statutes. Recognize the authority of this *Society* in all matters relating to the interpretation of this Code in accordance with the statutes of the United States and the various states and the decisions of courts and governmental agencies of competent jurisdiction.

I have answered all of the questions on Page One truthfully and to the best of my knowledge, and agree that if I am accepted as a member of the **Society of Northern Ohio Professional Photographers**, I will abide by the Society's Code of Ethics as stated above.

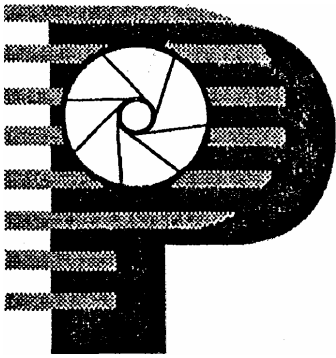
Applicant's Signature _____ **Date** _____

Payment Method

Make checks payable to: **SONOPP** Ck # _____ (circle one) **VISA MasterCard Discover American Express**

Account # _____ **Expires** _____ **Signature** _____

Mail this application with dues to: SONOPP Membership, 7526 Brecksville Rd., Independence OH 44131
After receipt of your application, a sponsor will be assigned to you and will contact you for an interview.



Professional - Owner or Department Head of a photographic business (Studio, Corporation or Industrial.) whose primary activity is photography. Must derive the major portion of their income (at least 51%) from photography and must have proof of vendor's license. **Annual Dues \$90**

Supplier - Professional Supplier whose primary activity is related to photography. **Annual Dues \$80**

Employee - A person engaged in the business of Professional Photography and must be employed by an Active Professional Member in the Society. **Annual Dues \$60**

Colorist/Retoucher - A person providing handcraft services to the photographic profession. **Annual Dues \$60**

Part-Time Professional - A photographer who derives less than 51% of his or her income from photography and/or electronic imaging. **Annual Dues \$90**

Student - A person attending school full time and studying photography. **Annual Dues \$25**

Retired - A member of the Society who is no longer active in the business of Professional Photography. **Annual Dues \$45**

All new members are probationary for one year. Only Professional members may hold office and vote at society meetings.

----- *Sponsor's Affidavit* -----

As a member of **SONOPP** in good standing, having been a member for at least one year and being current with my dues, I hereby sponsor this applicant. I am familiar with the applicant's photography and business practices and truly feel that he or she would be an asset to the **Society of Northern Ohio Professional Photographers**. I understand that I may be interviewed about this individual.

Sponsor's Signature _____ Date _____