MPS membership No.: _

MALTA PHOTOGRAPHIC SOCIETY

MEMBERSHIP APPLICATION FORM

NEW APPLICATI	ON ()	KEINI	EWAL (
Surname:		Name:	
Surname:		Name:	
ID No:		Date of Birth:	
Address:			
Email Address:			
Mob/Tol No.			
Occupation:		Signature:	
The Malta Photographic Society collects contact gept secure as specified in General Data Protect egal obligations. The only people with access to The Society will keep this data whilst members! After this period any data held will be securely contact to withdraw permission for MPS to the right to withdraw permission for MPS to the secure of the withdraw permission for the secure of the secure of the withdraw permission for the secure of the withdraw permission for the secure of the secure of the withdraw permission for the secure of the secure of	ction Regulations 2018. The data held wil to this data will be members of the comm hip and permission is maintained. deleted. Any person for whom we are hol	Il not be shared with any third parties, for hittee. This data will only be used to cont ding data has the right to view this data	r any reason, other than to meet act you for and on behalf of MPS.
	ONE YEAR	TWO YEARS	THREE YEARS
Standard Membership	€40	€70	€105
Senior Citizens (61+)	€30	€50	€75
Joint Membership	€70	€130	€195
Applications must be accompar Society. One may also pay by d IBAN: MT84 VALL 2201 3000 00	irect bank transfer into the Ma	lta Photographic Society BoV	savings account,
	For Office Use		
Fee paid:	Date of application:	:	_
Receipt No.:	On Line Applica	ntion Ref:	

Method of Payment: