

**DELAWARE PROFESSIONAL PHOTOGRAPHERS, INC.
MEMBERSHIP APPLICATION**

APPLICANT'S NAME: _____ SPOUSE: _____
BUSINESS NAME: _____ BUSINESS PHONE: _____
ADDRESS FOR MAILING: _____ HOME PHONE: _____
CITY: _____ STATE _____ ZIP: _____ COUNTY: _____
MEMBERSHIP CATEGORIES: ___ ACTIVE ___ ASSOCIATE ___ SUSTAINING
STATE BUSINESS LICENSE # _____ PPA # _____
APPLICANT'S POSITION _____ % WORK RELATED TO PHOTOGRAPHY
___ % WEDDINGS ___ % PORTRAITS ___ % COMMERCIAL ___ % INDUSTRIAL
___ % VIDEO ___ % PHOTOJOURNALISM ___ % OTHER
OTHER ASSOCIATION MEMBERSHIPS: _____
DEGREES _____ CPP ? _____ YEAR CERTIFIED _____
SPONSORED BY _____

CODE OF ETHICS

As a requirement for admission to and retention of membership in the Delaware Professional Photographers, Inc., I agree to strive at all times to upgrade and improve my knowledge and skill of professional photography, marketing, and related areas.

In all my dealings with users of photography and the general public, I will:

1. Strive to present all photographic services in surroundings and in a manner which reflects the highest level of professionalism.
2. Deal with all users of photography and the general public with honesty and integrity.
3. Not use any marketing or competitive practice which violates any Federal 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.
4. Strive at all times to produce photography and photographic services in accordance with the highest levels of professionalism.
5. In all dealings with fellow professional photographers, students, and others who aspire to be professional photographers, I shall share the knowledge and skill of professional photography.
6. Support efforts for and assist in the education of all interested persons and the general public in the art and science of professional photography.

SIGNATURE: _____ DATE: _____

REC'D ____/____/____ \$ ____ DDP \$ ____ PPA

TENTATIVE APPROVAL ____/____/____ FINAL APPROVAL ____/____/____