



Application for **Educator/Student** Membership

Dear Applicant,

Thank you for applying for membership with the Society of Camera Operators. The **Educator Membership** enables full-time faculty members to be a valuable link between the Society of Camera Operators and film students, and gives members access to SOC events, resources and networking opportunities with some of the finest and most respected professional Camera Operators in the industry.

Student Associate Membership enables full-time students to become familiar with the art and craft of the Camera Operator and benefit from personally getting to know some of the finest and most respected professional Camera Operators in the industry.

Benefits of Educator/Student Membership:

- Subscription to the Society's quarterly magazine, *Camera Operator* and membership eNewsletter.
- Access to meetings, seminars and Society functions.
- The opportunity to attend the SOC Lifetime Achievement Awards.
- Your name listed in the membership roster on the SOC website and *Camera Operator* magazine.
- If a Student Associate Member wishes to become an Associate Member of the SOC upon graduation, they will be exempt from the Associate Membership initiation fee (a \$100 savings). A new application must be submitted within one year of graduation. SOC Student Associate Membership is only open to students actively enrolled in an undergraduate or graduate educational program.

What To Send:

EDUCATOR Membership

- A letter from the Dean/school Administrator stating you are employed at a college/university OR a copy of your faculty ID.
- Current resume.
- The \$50.00 USD initiation fee for educator membership. Make check or money order payable to Society of Camera Operators. **Note:** Annual dues of \$50.00 USD will be due in your Anniversary month.

STUDENT Membership

- A letter from a faculty member/school Administrator stating you are a full-time Student OR a copy of your student ID and evidence of a full-time academic schedule.
- A letter from you stating your reasons for applying to the SOC for Student Associate membership.
- The \$50.00 USD application fee for student membership. Make check or money order payable to Society of Camera Operators. **Note:** Annual dues of \$50.00 USD will be due in your Anniversary month.

Where To Send:

Society of Camera Operators
Attn: Membership Committee Chairperson
PO Box 2006
Toluca Lake, CA 91610



Application for Educator/Student Membership

Check# _____
Amount: _____
Date: _____

Office Use Only

Type of Membership:

Educator

Student

Reinstate

Select Educator or Student

Name: _____
First Middle Last

Mailing Address: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

Home Phone: _____ Cell Phone: _____

Email _____ Website: _____

Providing your email address grants us permission to keep you informed of SOC news and events via this medium. It will not be sold or provided to any third party for any reason. All SOC email originates from our Webmaster. You may opt-out any time.

School: _____

For Educator Applicants

Courses Currently Teaching: _____

For Student Applicants

Expected Graduation Date: _____ Terminal Degree: _____

Professional Objective: _____

Fees:

Initiation (One-Time)

Dues (Annual)

Submit with application

Due in your Anniversary Month

Student Membership	\$50	\$50
Educator Membership	\$50	\$50
Reinstate – Student Membership	\$50	
Reinstate – Educator Membership	\$50	

Applicant's Signature: _____

(Office Use Only)

PRESIDENT: _____ Date Approved: _____

APPROVING BOARD MEMBER: _____ Approved Membership Type: _____