

FRPS

For Office Use: Submission Number

BOOKING FORM

FOR OFFICE USE ONLY	Return Method							
Received Date:	Overseas Courier		F	Personal Collection				
Booking Confirmation Date:	Uk	UK Courier (£18 Paid)		Non Return				
All fields are mandatory Please Complete in BLOCK CAPITA	ALS							
1. PERSONAL DETAILS								
Membership Number	(if applicable)	Date of Birth	I	I	dd mm yy			
Title First Name(s)		Surname						
2. CONTACT INFORMATION								
Address		City						
		County						
Country		Postcode						
Contact Number Email								
3. ASSESSMENT DATE Click here for available assessment dates.								
Preferred Assessment Date Genre								
Do you plan to attend the assessment in per *Photobooks Genre is held without an audience	Yes	No	I'll attend online					
Please note you must send your final submission to us at least 21 days prior to the Assessment Date								
4. SUBMISSION FORMAT Please indicate which format you intend to submit (One only) *Please skip this section if Photobooks Genre is selected								
PRINT	PRINT DIGITAL				воок			
5. TERMS & CONDITIONS you must tick and sign the following in order for your booking to be processed.								
✓ I have read and agree with the the RPS Privacy Policy (www.rps.org/privacy-policy)								
✓ I have read and agree to abide by the Distinctions Terms & Conditions (www.rps.org/distinctions-terms-conditions)								
Applicant Signature			Date	I	I			

On receipt of this Booking Form, a confirmation email will be sent to the email address stated above. You will find the Submission Details Form attached to the confirmation email, which must be completed and returned with your submission.

6. APPLICATION FEE	
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Fellowship Submission Fee

£170.00

[All prices valid until 31/12/2024]

Concessions

Full Time Student | 25 & Under | Disabled

£85.00

(Please include proof of status with this form)

7. RETURN POST	AGE			[All prices valid until 31/12/20)24]			
UK								
£18 Mainland	UK Courier* (up to 10kg)	Non-Ret	urn	Personal Collection				
OVERSEAS								
Courier**	Non-Return							
*Maximum claim for loss of por	tfolio is £50							
**Payment will be debited from your credit card for the return of your Portfolio up to the value of £90. If postage is over £90, your authorisation will be requested. When paying by PayPal, please also include card details so that return postage can be taken.								
	TOTAL £							
8. PAYMENT MET	HOD							
CHEQUE	Please make cheques payable to The R	oyal Photographic	; Society					
PAYPAL	Please pay distinctions@rps.org. In the E.g. Jo Bloggs FRPS DD/MM/YY	message box plea	ise type your na	me then FRPS followed by your assessment date.				
CARD	Visa Mastercard Maestro			I				
	Expiry Date (MMYY)							
	Overseas applicants are	requested to mak	e payment in ste	erling				

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the RPS achieve more