

## 2018 Membership Form

Membership Secretary: Michelle Smith  
021-157-6605

[canterburyfilmsoc@gmail.com](mailto:canterburyfilmsoc@gmail.com)  
[www.canterburyfilmsociety.org.nz](http://www.canterburyfilmsociety.org.nz)

New member      Returning — Membership #:

First name      Last name      Date

Street address      Suburb

City      Postcode

Email address      Phone

### PAYMENT

Please select your membership type (Full Memberships last 12 months after joining date):

\$132 NEW Full Membership  
(new or returning after more than 12 months' absence)

\$122 CONCESSION Full Membership  
(seniors/returning full members/unwaged)

\$70 STUDENT Full Membership  
(secondary and tertiary)

\$30 Flexi-Pass  
(3 films, no expiry date)

\$ Donation

**\$ Total payment**

Payment method:    Online    Cheque    Cash

Online banking: Kiwibank 38 9015 0536378 00

Please use your name as a reference, and confirm via email to  
[canterburyfilmsoc@gmail.com](mailto:canterburyfilmsoc@gmail.com)

How would you like to receive your membership card?

Posted to me      Pick up in person before a film

I'd like to receive event reminders by:    Email    Text message    Both

How did you hear about us?

Friends    Brochure    Facebook/Twitter    Other:

(Optional) My age bracket is:

13-18    18-29    30-39    40-49    50-59    60-69    70-79    80-89