CANTERBURY FILM SOCIETY

2018 Membership Form

Membership Secretary: Marina Chester
(03) 9604-629

canterburyfilmsoc@gmail.com
www.canterburyfilmsociety.org.nz

☐ New Member ☐ Returning — Membership #:

First Name | Last Name | Date

Street Address | Suburb

City | Postcode

Email Address (please use block letters) | Phone

PAYMENT

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

☐ $132 NEW Membership
☐ $122 DISCOUNTED Membership *(seniors/returning members/Film Guild Members)*
☐ $70 STUDENT Membership *(secondary and tertiary)*
☐ $30 Flexi-Pass *(3 films, no expiry date)*
☐ $ Donation
$ Total payment

Payment method: ☐ POLiPay/Online ☐ Cheque/Cash ☐ QuickPay (venue only)

Online banking: Kiwibank 38 9015 0536378 00
Please use your name as a reference.

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 ☐ Neither

(Optional) How did you hear about us?
☐ Family/friends ☐ Brochure/poster ☐ Social media ☐ Star/Press
☐ Probus ☐ Armageddon ☐ IFF ☐ Other:

(Optional) My age bracket is:
☐ 13–18 ☐ 19–29 ☐ 30–39 ☐ 40–49 ☐ 50–59 ☐ 60–69 ☐ 70–79 ☐ 80–89