



# Membership Form

[canterburyfilmsoc@gmail.com](mailto:canterburyfilmsoc@gmail.com)

[www.canterburyfilmsociety.org.nz](http://www.canterburyfilmsociety.org.nz)

First Name

Last Name

Date

Street Address

Suburb

Postcode

Email Address (please use block letters)

Phone

**Please select your membership type:**

- \$130 Full Membership (*new and returning members*)
- \$120 DISCOUNTED Full Membership (*seniors/unwaged/Film Guild Members*)
- \$90 STUDENT Full Membership (*tertiary*)
- \$50 HIGH SCHOOL Full Membership (*13–18 years*)
- \$70 Half-Year Membership (*Feb–June*)    \$70 Half-Year Membership (*June–Oct*)
- \$30 Flexi-Pass (*3 films, no expiry date*)

**Payment method:**    Online    Cash    EFTPOS/Credit Card

Online banking: Canterbury Film Society 38 9015 0536378 00  
Please use your name as a reference.

**I'd like to receive event reminders by:**    Email    Text message    Neither

**How did you hear about us?**

- Family/friends    Brochure/poster/flyer    Social media    Star/Press    NZIFF
- Other:

**My age bracket is:**

- 13–18    19–29    30–39    40–49    50–59    60–64    65–69    70–79    80–89