



Membership Application Form

Thank you for joining! Please complete and return with your membership fee to:

Pam Firth, BFS Treasurer, 10 Beswick Gardens, Bracknell, Berks, RG12 2QL

1. Your Details:

Name:

Address:

Post Code : _____ Tel. No. _____

Email address: _____

(if you provide an e-mail address, the BFS monthly mail-outs and other communications from BFS will be sent by e-mail; this saves us postage costs)

A benefit of BFS membership is a ticket discount and early booking for all BFS films at South Hill Park. If you do NOT want your details to be passed to SHP to access this benefit, please tick here

If you do NOT want your details to be held on the BFS database, please tick here
(This information will not be used for anything other than in conjunction with your BFS membership; please see our GDPR policy for further details)

We have been asked by *Cinema for All* to provide the following information (please tick the appropriate box):

Age Group: 15-20 [] 21-25 [] 26-35 [] 36-45 []
 46-55 [] 56-65 [] Over 65 []

Would you consider yourself disabled? Yes / No

2. Membership Fee (*cheques should be made payable to "Bracknell Film Society"*)

- I enclose £10.00 membership fee for the forthcoming year
- I am retired and enclose £7.00 membership fee
- I am a registered Student/Unemployed/Disabled and enclose £7.00 membership fee

Signature _____ Date _____

3. Are there any films you have seen that you feel should be included in the BFS programme?

Film Title	Country	Director	Year

If your film selection is shown you will be asked to contribute to the programme notes for the screening.

4. How did you hear about us?
