

Townsville Cinema Group

PO Box 1821, Aitkenvale Q4814

APPLICATION FOR NEW MEMBERSHIP 2012 SEASON

Membership fee: **\$80 per person**

<p>Your name(s)</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>Up to three persons with the same postal address may apply on one form.</p>	<p>Your age group (tick boxes as appropriate):</p> <p><input type="checkbox"/> up to 25 <input type="checkbox"/> 26-35 <input type="checkbox"/> 36-45 <input type="checkbox"/> 46-55 <input type="checkbox"/> over 55</p> <p><input type="checkbox"/> up to 25 <input type="checkbox"/> 26-35 <input type="checkbox"/> 36-45 <input type="checkbox"/> 46-55 <input type="checkbox"/> over 55</p> <p><input type="checkbox"/> up to 25 <input type="checkbox"/> 26-35 <input type="checkbox"/> 36-45 <input type="checkbox"/> 46-55 <input type="checkbox"/> over 55</p> <p>This item is optional. The information is used for film programming.</p>
<p>Postal Address:</p> <p>.....</p> <p>.....</p> <p>Postcode:</p>	<p>Email address:</p> <p>(preferred)</p> <p>(alternative)</p>

Signed **Date**

PAYMENT

<p>Membership: members @ \$80 per person</p>	<p>\$</p>
<p>I will pay by</p> <p><input type="checkbox"/> cheque/money order (payable to Townsville Cinema Group)</p> <p><input type="checkbox"/> direct deposit (EFT) to BSB 484-799, Account 00 229 2071</p> <p>When paying by direct deposit, please include your name as a reference</p>	

Return this form with your payment or EFT advice to PO Box 1821, Aitkenvale Q4814.

Note: We need a signed application form to comply with our Rules.

Your membership card will be posted to your postal address.

Website: www.cinemagroup.org.au

Email: info@cinemagroup.org.au

Committee contact: Floris van der Leest (4779 5739 H)

Membership enquiries: Bruce Gibson-Wilde (4779 2815)