



## MEMBERSHIP APPLICATION FORM

*Please complete this form and send it with your remittance to:*

Hugh Devonald (BFS Treasurer)  
 1 Flint Grove  
 Bracknell  
 RG12 2JN

NAME:.....

ADDRESS:.....

.....  
 .....

TEL. NO: .....

E-MAIL ADDRESS .....

**I would like to join Bracknell Film Society and enclose a cheque for £10 / £5 (delete as appropriate) made payable to “Bracknell Film Society”**

**Signed**  
 .....

**Date**  
 .....

**Please complete the following:**

**1. Age Group (please tick one box):**

Under 16		16 - 20		21 - 25		26 - 35	
36 - 45		46 - 55		56 - 65		Over 65	

**2. Do you consider yourself disabled?      Yes / No**

**3. One of the benefits of having BFS Membership is early booking and £1.00 discount on all BFS films at South Hill Park. If you do NOT wish your details to be passed to SHP to action this benefit please tick here.**

For Records only	
Mbr.No.	Date