

Become a member of BRYN MAWR FILM INSTITUTE

NAME(S)

ADDRESS

CITY

STATE

ZIP

TELEPHONE

EMAIL (Important for updates)

MEMBERSHIP LEVEL

Basic Annual Membership

- \$60 **Individual**
- \$110 **Family**
- \$35 **Student**
- \$45 **Senior Individual (65+)**
- \$75 **Senior Couple (65+)**

PLEASE CHECK ONE:

New Membership Renewal Gift Membership

\$ _____ Membership Dues

\$ _____ Extra Gift

\$ _____ Total

Sustaining Annual Membership

- \$110 **Producer Individual**
- \$200 **Producer Family**
- \$500 **Mogul Individual**
- \$1,000 **Angel Family**
- \$2,500 **Director Family**
- \$5,000 **Film Maker Family**
- \$10,000 **Cineaste Family**

My check is enclosed. Make checks payable to: Bryn Mawr Film Institute or BMFI

Please charge my:

MC VISA AMEX DISC

Card No. _____

Signature _____

Billing Zip Code _____ Exp. Date _____

Please fill out for Gift Memberships only:

NAME(S) OF GIFT RECIPIENT

ADDRESS OF GIFT RECIPIENT

CITY

STATE

ZIP

To become a member of BMFI, please mail your completed application and payment to:

Bryn Mawr Film Institute
P.O. Box 1058
Bryn Mawr, PA 19010