

# BRYN MAWR FILM INSTITUTE

# M E M B E R

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+)**

### 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**

*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**

## PLEASE CHECK ONE:

- New Membership    Renewal    Gift Membership

\$ \_\_\_\_\_ Membership Dues

\$ \_\_\_\_\_ Extra Gift

\$ \_\_\_\_\_ Total

## GIFT MEMBERSHIP RECIPIENT INFORMATION

Send membership materials to:  Giver  Recipient

\_\_\_\_\_  
GIFT RECIPIENT NAME(S)

\_\_\_\_\_  
GIFT RECIPIENT ADDRESS

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
GIFT RECIPIENT TELEPHONE

\_\_\_\_\_  
GIFT RECIPIENT EMAIL

## PAYMENT INFORMATION

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

Please charge my:    MC    VISA    AMEX    DISC

\_\_\_\_\_  
CARD NUMBER

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
BILLING ZIP CODE

\_\_\_\_\_  
EXP. DATE