

# CFC INSIDERS MEMBERSHIP FORM

Please complete and return this form by mail, fax or email: [mkhan@cfccreates.com](mailto:mkhan@cfccreates.com)

## CONTACT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (H): \_\_\_\_\_ (B): \_\_\_\_\_

E-Mail: \_\_\_\_\_

## MEMBERSHIP INFORMATION

Membership in the name of: \_\_\_\_\_

Please select a Membership level:

- CFC AMBASSADOR \$2000+
- CFC COLLABORATOR \$1400 - \$1999
- CFC ASSOCIATE \$800 - \$1399
- CFC ENTHUSIAST \$400 - \$799
- CFC FAN \$100 - \$399

TOTAL DONATION: \$ \_\_\_\_\_

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### METHOD OF PAYMENT

- Cheque (Made out to the Canadian Film Centre)
- VISA
- American Express
- MasterCard

Card Number: .....

Expiry Date: .....

Name on Card: .....

### Please indicate if you would like to take advantage of the following:

- Please send me information on volunteer opportunities.
- Please send me information on Corporate Sponsorship opportunities.
- I wish to remain anonymous. Please do not include me in any donor acknowledgement.

Thank you for your support of the Canadian Film Centre.