



**MEMBERSHIP APPLICATION FORM  
for 2019-20 season**

Name(s) .....

.....

Address .....

.....

.....

email: .....

Telephone: .....

Please add my details to the Society distribution list for updates and news (Please tick)

Please indicate number of memberships required

Single membership - £25	
Concession membership - £20	
Full-time student (16-21) - Free	

Total payable: £.....

Please make cheques payable to **Strathendrick Film Society**. Please bring the completed form at your first attendance, or return to:

**Terry Conway,**  
Strathendrick Film Society,  
Mooredge Cottage,  
Roman Road,  
Balfron,  
G63 0PW

**Please enclose a stamped,  
addressed envelope. If none  
supplied, membership cards must  
be collected at your first  
attendance.**

Telephone enquiries: 01360 440250

email: strathfilmsoc@yahoo.co.uk

[www.strathfilmsoc.org.uk](http://www.strathfilmsoc.org.uk)