



Members matter... Join us today!

Member # _____

Name(s) on card: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Membership contributions are tax deductible. See reverse for more information on membership levels. Gift from _____ Phone # _____

Please select a membership level:

- Adult Single** (\$45)
- Adult Couple** (\$65)
- Writer Single** (\$150)
- Writer Couple** (\$250)
- Senior Single** (\$35)
- Senior Couple** (\$50)
- Cinematographer Single** (\$500)
- Cinematographer Couple** (\$750)
- Student** (\$25)
- Family** (\$90 - up to 5 cards!)
- Producer Single** (\$1,250)
- Producer Couple** (\$2,500)

Check made to Pickford Film Center enclosed

Please charge my: Visa Mastercard Discover

Card # _____ Exp Date: _____ CSV# _____

Online: www.pickfordfilmcenter.org/support/membership

Mail to: PFC Membership, P.O. Box 2521, Bellingham, WA 98227