



**WOMEN IN FILM AND TELEVISION NSW
MEMBERSHIP FORM**

Name: _____

Address: _____

Email: _____

Phone nos: _____

Area of employment: _____

Area of study: _____

ANNUAL RATES

Indicate the type that applies:

- Professional: \$75
- Low-Income (under \$35,000 pa) / Unemployed: \$50 (enclose details)
- Friend: \$50 (open to men and to women outside the industry)
- Student: \$25 (enclose full-time student ID)

PAYMENT AMOUNT \$ _____

Please make cheques and money orders payable to WIFT NSW.
I DO / DO NOT require a tax-deductible receipt.

PAYMENT OPTIONS (circle one)

Cheque **Money Order** **Mastercard** **Visa** (no AMEX or Diners)

Card No: _____ -- _____ -- _____ -- _____

Expiry Date _____ / _____

Card Holder's Name: _____

Signature: _____
