



# BRADFORD ON AVON FILM SOCIETY

## Membership Form

Name	
2nd Name (if joint membership)	
Email	
Telephone	
Address	
Postcode	

Please print form and send with your cheque to:

Membership Secretary, 39 Christchurch Road, Bradford on Avon, BA15 1TB.

(cheques made payable to the Bradford on Avon Film Society)

Thank you.

**\* By submitting this form you give consent for BOAFS to hold your details in its records**