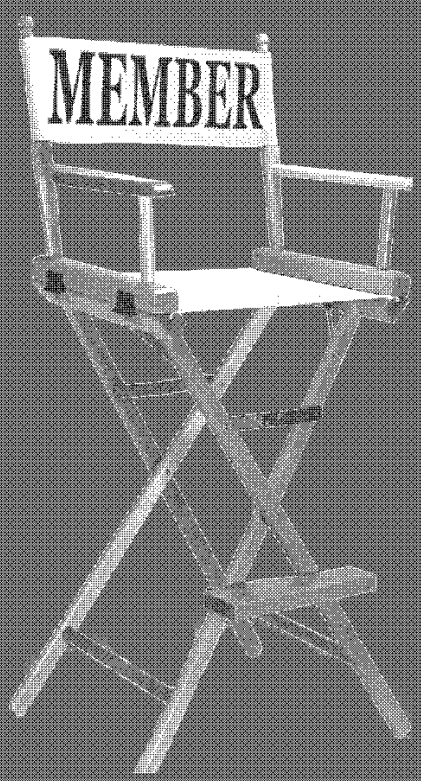
Membership Matters! WE keep ALL funds raised by membership, but HALF of our ticket sales goes to the distributor

Become a Cinema MEMBER

SUPPORT LONG ISLAND'S LEADING NOT-FOR-PROFIT, INDEPENDENT CINEMA



- **Individual Membership $55**
  - Pay only $7.00 for regular tickets (save $5.00 each time)
  - Pay only $6.00 for Mon-Fri matinees (save $6.00)
  - Two FREE tickets upon joining or renewing
  - Cinema monthly Program Guide mailed to your home
  - Member discounts on all Special Events and Workshops
  - Discounts at restaurants and businesses with membership card
  - Ability to purchase Express Passes (More Savings and No waiting on line!)
  - Special Members-only previews of the hottest new films!
- **Dual Membership $100** - *Same benefits as Individual Members, plus:*
  - Membership cards for two people
  - Four FREE tickets instead of two upon joining or renewing
- **Young Film Fan $30** - *Same benefits as Individual Members:*
  - Special invitation to free screening once per month (must provide e-mail address)
  - Must be 25 or younger or be a full-time student, with valid ID
- **Senior Membership $40** - *Same benefits as Individual Members:*
  - Must be 62 with valid ID
- **Sponsor Membership $250** - *Same benefits as Dual Members, plus:*
  - Reserve tickets by phone! Avoid Sold-Out shows! No Waiting on Line!
  - Name listed in Cinema Lobby
  - Insider's Newsletter from the Programming Director, mailed annually
- **Other Membership Levels with additional benefits**
  - Call Rene Bouchard, Director of Development, 631.423.7610 x.18 for details on Patron, Director's Circle and Cinema Friend membership levels as well as additional membership levels. Monthly payment plans available for Sponsor Membership and above; see CinemaArtsCentre.org for details.

Sign up Online: cinemaartscentre.org/get-involved/become-a-member/ or use the form below:

Join, Renew, or Extend your Cinema Arts Centre Membership

Name(s)_____ **Address**_____

City_____ **State**____ **ZIP**_____ **Phone** _____

E-mail_____ **(receive our weekly schedule — will be kept confidential)**

Total amount enclosed: $_____ **Payment: ❍Check/Money Order ❍Visa ❍MasterCard ❍Cash**

Credit Card #_____ **Expiration Date** _____/_____ **(code: Folio)**

Signature _____ **Birthday:** _____

Mail to: Cinema Arts Centre, P.O. Box 498, Huntington, NY 11743. Or call 631-423-7611. Or sign up on our website: www.cinemaartscentre.org

❍Basic $55 ❍Young Film Fan $30 ❍Senior $40 ❍Sponsor $250 ❍Director's Circle $1,000
❍Dual $100 ❍Dual Senior $80 ❍Patron $525 ❍Cinema Friend $2500

Express Pass *(Members Only)*: **❍5 Passes $35 / ❍10 Passes $64 / ❍20 Passes $122**

❍Extra Tax-deductible donation: $_____ **If your employer matches donations, please enclose a matching gift form**

For Office Use Only: rec'd:_____ total amt.:_____ level:_____ comps:_____ ent:_____ expass:____
ent: / ty: mb# exp: