



Broome Movies

Membership Renewal Form

Private and Confidential

Please PRINT clearly in CAPITAL letters using a black or blue pen. One form p/person.

Memberships cost \$20.00 p/person

Adult (16 years +)

Child (3 – 15 years)

Concession

Senior

Please use photo on file

Please use new photo attached

Please attached
new
passport size
photo here

Replacement Cards cost \$5.00 p/card

Given Name: _____ Surname: _____

Date of Birth: _____ Age: _____ Male/Female: _____

Postal Address: _____

Suburb: _____ P/code: _____

Phone/Mobile: _____ Email: _____

I have read and agree to the attached membership Terms and Conditions.

Member Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____
(if under 16)

Please Note: Proof of ID is required when paying for your membership

OFFICE USE ONLY:

Proof of ID supplied: Driver's License Concession Card Senior Card
 Student ID Proof of Age Card Previous M/ship Card

Total Amount Paid \$ _____ Staff Member: _____ Date: _____

Date Membership Card issued: _____ Expiry date: _____