



CINEMA SOCIETY OF WEST VALLEY

HARKINS PARK WEST 14
9804 West Northern Avenue, Peoria, AZ 85345

“Welcome to the Cinema Society of West Valley”—Preview the Best in Cinema!

The Cinema Society of West Valley is your ticket to discovering carefully selected motion pictures by the top major and independent studios, as well as undiscovered non-studio gems, once a month on **selected Thursday afternoons* from Fall through Spring.**

A typical Cinema Society program includes a cinema chat, formal introduction, screening of a feature film, classic, documentary and/or short subject, followed by a discussion.

For an additional fee, members are invited to partake in various cinema travel opportunities.

Your CINEMA SOCIETY OF W. VALLEY Membership Includes:

- ✦ Private screening of prestige feature films, classics and shorts once a month on selected **Thursdays afternoons* from Fall through Spring**
- ✦ Transferable membership admission *(pass your seat to others if unable to attend an event)*
- ✦ Socializing with fellow film lovers
- ✦ Informative discussions
- ✦ Invitations to National & International film festival trips
- ✦ Monthly newsletter via email

— JOIN THE DIRECTOR’S CIRCLE —

Benefits include:

- ★ **Priority Entrance** to auditorium
- ★ **Invitation to Filmmaker Receptions**
- ★ **Two/2 Complimentary Guest Passes** to future Cinema Society events

Simply write your contribution amount in the “Optional Director’s Circle” line listed in the registration form.
(Minimum \$100 contribution per person)

— A limited number of memberships are available for the season. —

No refunds / No exchanges / Cinema Society has the right to refuse membership. Each membership good for one person only.

MAIL OR EMAIL THIS COMPLETED APPLICATION OR SIGN-UP ONLINE (WWW.CINEMASOCIETY.COM)

1

Name(s) _____ Address _____
 _____ City _____ State _____ Zip _____
 E-Mail Address #1 _____ Cell Phone (_____) _____
 E-Mail Address #2 _____ Home Phone (_____) _____

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EARLY BIRD 2018-2019 SEASON* SIGN UP:

[] Please reserve _____ passes at **\$120** each \$ _____
 [] **or after September 30th:** Please reserve _____ passes at **\$135** each..... \$ _____
 [] **Optional: Director’s Circle Member** *(Minimum \$100 per person)* \$ _____
Total \$ _____

* Dates for 2018-2019 Season: November 15, December 13, January 24, February 21, March 14, April 4

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[] CHECK ENCLOSED made payable to: **CINEMA SOCIETY**

or [] PLEASE CHARGE MY: MasterCard Visa
 # _____ - _____ - _____
 Exp. Date ____/____/____ 3-digit security code (back) _____
 Signature _____

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Incidentally, my friend(s) would like Cinema Society information:

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Email _____