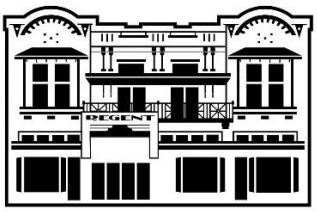

REGENT
DANNEVIRKE'S HISTORIC CINEMA
EST. 1918

Membership Application

Full Name:

Street Address:

Town:

Email:

Phone: Cell:

Fees owing: $25.00

Total Paid $

Payments are due within one month of completing the membership application form.
Preferred payment method is by online banking
Dannevirke Regent Cinema Inc. ANZ 06-0613-0436827-02 Reference: Membership

Members benefits will include:

- 2 Free Adult Movie passes upon joining
- Membership card with 10th movie free
- Exclusive Member-only movie events during the year as planned by the committee

I consent to the collection of these details by DRC for the purpose of DRC Registration and for DRC to retain and use the information for the societies membership register. I acknowledge my right to access and correct the information. This consent is given in accordance with the Privacy Act 1993.

Signed: _____ Date: _____

For Committee Use: Membership: Approved □ Declined □ Date_____
Entered in Membership Register □ Receipt Number _____
Acknowledgement Letter & tickets sent _____