



555 Brooksbank Avenue, Building 5, Suite 210B North Vancouver, BC V7J 3S5 • Tel: 604-983-5354 • Fax: 604-983-5796 • info@ifilmalliance.com

INDICATE TYPE OF MEMBERSHIP REQUIRED

CORPORATE MEMBERSHIP: \$ _____
Prices Vary, contact IFA for details.

INDIVIDUAL MEMBERSHIP: \$95.00

STUDENT MEMBERSHIP: \$60.00

TRIAL MEMBERSHIP: \$20.00

FIRST NAME: _____ MIDDLE NAME: _____ LAST NAME: _____

TITLE: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____

TEL. (day): _____ TEL (evening): _____ TEL (mobile): _____ FAX: _____

E-MAIL: _____

BIRTH YEAR: _____ GENDER: _____

PRIMARY FILMMAKING AFFILIATION: _____

OTHER FILMMAKING AFFILIATION(S): _____

HOW DID YOU HEAR ABOUT IFA: _____

Canada

Send Cheque or Money Order to:

IFA – Independent Filmmakers Alliance
Suite 210 – Building 5
Lions Gate Studios
555 Brooksbank North Vancouver, V7J 2S5
Canada

US/International

Send Cheque or Money Order to:

IFA – Independent Filmmakers Alliance
468 N Camden Dr Suite # 200
Beverly Hills, CA 90210
USA