



NAME: _____
Last First

NAME: _____
Last First

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City Province Postal Code

TEL: _____
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E-MAIL: _____
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DOC communication is primarily by e-mail. Failure to provide a correct e-mail could result in loss of important information regarding events, sponsorship opportunities and special discounts on products and services.
DOC does not sell, distribute or share membership information with outside vendors or parties, except where membership lists are required for benefits exclusively negotiated by DOC.
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CHAPTER: British Columbia Alberta Winnipeg Ottawa-Gatineau
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What is your primary reason for joining DOC?

MEMBERSHIP INFO: Select ONE. All prices are in Canadian dollars. The prices listed below cover membership from point of purchase - Dec 31st 2011

CATEGORY	FEE	DESCRIPTION	BENEFITS
<input type="checkbox"/> INDIVIDUAL	HST 190.00 Total 214.70		<ul style="list-style-type: none"> One complimentary subscription to Point of View magazine. Discounts on registration to Toronto's Hot Docs, BANFF World Television Festival, Washington DC's Realscreen Summit, industry events, reciprocal film organizations and other services and products including preferred rates on insurance with Front Row Insurance Brokers Exclusive rates to local professional development seminars, workshops and screenings Access to members' meetings. Voting privileges at individual chapters, referendums and national general membership meetings. Access to the members-only DOC-discussion listserv. National and regional electronic newsletters and information distributed through the National and Regional DOC offices. Eligibility for board director positions at national and chapter levels.
<input type="checkbox"/> ORGANIZATION	HST 750.00 Total 847.50	This rate is for a 5-10 person company. All employees of the company have access to benefits.	
<input type="checkbox"/> ARRQ/AMPIA	HST 133.00 Total 150.29	Must be a member of ARRQ / AMPIA	
<input type="checkbox"/> REMOTE	HST 100.00 Total 113.00	Must live 50km outside of chapter region.	
<input type="checkbox"/> STUDENT	HST 60.00 Total 67.80	Must provide valid student I.D.	

Donations: The Documentary Organization of Canada gratefully accepts all donations. A tax receipt will be issued for any donations made. Please indicate the amount: \$10 \$25 \$50 Other: _____

Are you interested in volunteering with DOC? Yes No
If yes, please indicate your preferred area of interest and we will contact you:
 Advocacy Events Office Support Other: _____

Visa/Mastercard Number _____ Expiry Date _____ CVV. _____
Name on card _____ Signature _____

CVV is the 3 digit number on the back of your card

Cheques: Please make cheques payable to: *The Documentary Organization of Canada*
All payments should be sent to the following address:
Documentary Organization of Canada
Centre for Social Innovation, 215 Spadina, Suite 126
Toronto ON M5T 2C7
Telephone: 1 877 467 4485 or Fax (416) 979 3936

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Credit Card Processed:

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