

Showroom Soulmates and Film Lovers

Registration form

Personal data will be stored in compliance with the Data Protection Act and will not be shared with any third parties.

Membership Registration

Please indicate what type of membership/member you would like to renew/become below (please note it is one registration form per person) and complete your contact details overleaf. For the Plus One option, only the primary member's details are needed - one card is issued and the Cinema Guide will be mailed to this member. Your guest member can differ each time you visit if you wish.

Soulmate

- | | | |
|--|--------------------------|-------|
| Soulmates Full Membership | <input type="checkbox"/> | £35 |
| Soulmates Concession Membership | <input type="checkbox"/> | £27 |
| In addition I would like the Plus One Membership | <input type="checkbox"/> | + £20 |

Subtotal _____

- | | | |
|---|--------------------------|------|
| I would like to opt for the Green Membership and receive my brochure by email (save £7) | <input type="checkbox"/> | - £7 |
|---|--------------------------|------|

Total _____

Postal Subscriber

- | | | |
|-------------------------------|--------------------------|----|
| Cinema Guide Postal List only | <input type="checkbox"/> | £7 |
|-------------------------------|--------------------------|----|

Contact Information

First name _____

Last name _____

Address _____

Postcode _____

Email _____

Phone _____

Date of Birth _____

Tailor your updates

If you haven't done so already, please complete the activities and film preferences below so that we can keep you informed about programme updates and special offers – please tick all that apply.

- Adventure
- Classic Cinema
- Comedy
- Documentary
- Drama
- Family
- Foreign Language
- Horror
- Music
- Education Activities

Please return your form to Showroom Cinema, Paternoster Row, Sheffield S1 2BX or hand in at Box Office. Cheques should be made payable to Sheffield Media and Exhibition Centre Limited.

Administration purposes only

Received _____

Date processed _____

Card issued _____