I wish to purchase a gift certificate for: (name)	
Enclosed is my Cheque/Money Order payable to: Toron cards or post dated cheques)	to Film Society. (Please no credit
Please check appropriate box:	
\$15 Trial Membership \$25 \$50 \$75 \$80 Series Membership	
Name: Address: Province: Postal Code: Email Address:	
■ Please do not contact me in the future.	
■ I would like this sent directly to the recipient.	
Name: Address: Province: Postal Code:	
Mail To: Caren Feldman, 1 Canyon Avenue, #1011, Toronto, ON, Canada, M3H 4X8	