



APPLICATION FORM 2015

CATEGORY A: Active Members National Associations

Membership fee: €31 Euro per affiliated cinema

Please fill in the contact box, attach the statute of your organisation and a full list of your members including:

- Name of the cinema
- Number of screens and seats
- Full address, phone, fax and e-mail address
- Contact person

CATEGORY B: Active Members Individual Cinemas, Cinematheques

Membership fee: €46 per theatre

For each cinema, please fill in the contact box below and attach a brief presentation of your activities.

CATEGORY C: Special Members Festivals, associations or government bodies that support the goals of the CICAÉ

Membership fee: €460

Please fill in the contact box below and attach a brief presentation of your activities.

CATEGORY D: Associate members Natural persons or legal entities undertaking a specific action of cultural diffusion through film, without representing a cinema

Membership fee: between €46 and €460, upon evaluation of the application by the Board.

Please fill in the contact box below and attach a brief presentation of your activities.

CONTACT DATA

Organisation's name:

Legal representative:

Mail address:

Telephone:

Fax:

Email:

Website:

Members B only

Name of Cinema:

Address:

Payment:

1. Cheque in euros to the CICAÉ
2. By banking Transfer:
Bank: BNP PARIBAS PARIS AUDIOVISUEL
Address: 73 Bd Haussmann, F-75008 Paris
RIB: 30004 02270 00020192629 922
IBAN: FR76 3000 4022 7000 0201 9262 922
BIC/Swift: BNPAFRPPPLZ

The undersigned:

Legal representative of:
joins the CICAÉ.

Date:

Signature and stamp: