



The IMAGINARIUM  
science discovery center

## MEMBERSHIP APPLICATION

*Membership Entitles You to the Following Great Benefits:*

- ✓ Free admission for 12 months
- ✓ Free admission to over 250 science museums around the U.S. & world
- ✓ 10% Discount on store purchases over \$5
- ✓ Advance notice on special events and exhibits
- ✓ Discounts on birthday parties and programs

*Check One of the Membership Types:*

<i>Individual</i>
\$55
All Above Benefits for an Individual

<i>Family</i>
\$80
All Above Benefits for the Whole Family

<i>Family Plus</i>
\$100
All Above Benefits + 8 Guest Passes

<i>Homeschool</i>
\$125
All Above Benefits + 10 Homeschool Workshop Credits

<i>Associate</i>
\$120
All Above Benefits + 8 Guest Passes + \$10 Gift Certificate to The Science Store

*Membership Type:*

*Check the following:*

*New*

*Renewal*

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

2<sup>nd</sup> Adult First Name \_\_\_\_\_ 2<sup>nd</sup> Adult Last Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

*Children in Same Household:*

<i>First Name</i>	<i>Last Name</i>	<i>Birth Date</i>	<i>First Name</i>	<i>Last Name</i>	<i>Birth Date</i>

*Method of Payment:* Credit Card: Mastercard  Visa  # \_\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_

Name on card (please print): \_\_\_\_\_ Chg. Amount: \$ \_\_\_\_\_

Check: # \_\_\_\_\_ Ck. Amount: \$ \_\_\_\_\_ Donation Included in payment? Amount: \$ \_\_\_\_\_

**FOR OFFICE USE ONLY**

Today's Date \_\_\_\_\_ Expiration Date \_\_\_\_\_ Member # \_\_\_\_\_

Clerk Initials \_\_\_\_\_ Amount Paid \_\_\_\_\_ Receipt # \_\_\_\_\_ Data Entered \_\_\_\_\_