

## DESCRIPTION OF BENEFITS

### Basic Membership **\$100**

- Unlimited admission for up to 5 members to the Museum for one year
- 20% off Birthday Parties
- 10% off Great Stuff in our Museum Store
- Invitations to members only parties and previews
- Early registration and discounts for camps

### Gold Membership **\$125**

- Unlimited admission for up to 5 members to the Museum for one year
- 20% off Birthday Parties
- 10% off Great Stuff in our Museum Store
- Invitations to members only parties and previews
- Early registration and discounts for camps
- Free admission to over 300 Science Museums nation wide including MOSI (Museum of Science & Industry, Tampa)
- Free admission to over 140 children's museums nation wide including 11 in Florida
- Great month to month Free Admission Reciprocal to local area museums (please ask for a complete list)

### Platinum Membership **\$140**

- All benefits of Gold Membership PLUS...
- plus an additional 10% off in our Museum Store = 20%off

### Donor Membership **\$250**

- All benefits of the Platinum Membership PLUS...
- Donor recognition in our quarterly newsletter and website
- 10 Free admission tickets

## ADDITIONAL OPTIONS

### Joint Sunken Gardens **\$60**

- All benefits of Any Membership PLUS...
- Membership with Free Admission to Sunken Gardens

### Add-a-Guest **\$20**

- Only \$20 to add an additional member for the whole year

## TYPE OF MEMBERSHIP

- This Membership is a Gift  
 Renewal  New  
 Basic  Gold  Platinum  Donor  
 Sunken Gardens  Add a Guest

## MEMBERSHIP INFORMATION

### Member Name (s)

1)

(Title: Mr. Mrs., Ms., ...) (Adult Head of Household)

2)

(Title: Mr. Mrs., Ms., ...) (Birthday if child: mm/dd/yy)

3)

(Title: Mr. Mrs., Ms., ...) (Birthday if child: mm/dd/yy)

4)

(Title: Mr. Mrs., Ms., ...) (Birthday if child: mm/dd/yy)

5)

(Title: Mr. Mrs., Ms., ...) (Birthday if child: mm/dd/yy)

### \$20 Add-a-Guest Information (limit 2)

(Title: Mr. Mrs., Ms., ...) (Birthday if child: mm/dd/yy)

(Title: Mr. Mrs., Ms., ...) (Birthday if child: mm/dd/yy)

## PAYMENT INFORMATION

### Total Amount:

Membership Fee: \$\_\_\_\_\_ + Donation: \$\_\_\_\_\_ = \$\_\_\_\_\_

### Credit / Debit Card:

MasterCard  Visa  Discover  AMEX

Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

**Check:** Please make all checks payable to  
**Great Explorations Children's Museum**

## Members Mailing Address

Street Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

## Members Phone & Email

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

Work / Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

### Office Use Only

Record # \_\_\_\_\_

ID # \_\_\_\_\_

## IF MEMBERSHIP IS A GIFT Purchaser Mailing Address

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

## Purchaser Phone & Email

Phone \_\_\_\_\_

Email Address \_\_\_\_\_