

Children's Museum of Phoenix

Membership

*Most Memberships
pay for themselves in
less than 5 visits!*

Enrollment

CHOOSE A MEMBERSHIP LEVEL

- | | |
|---|------------------|
| <input type="checkbox"/> CLIMBER - admits 1 adult, 1 child | <u>\$125/yr.</u> |
| <input type="checkbox"/> CREATOR - admits 3 people | <u>\$160/yr.</u> |
| <input type="checkbox"/> LEARNER - admits 4 people | <u>\$195/yr.</u> |
| <input type="checkbox"/> PAINTER - admits 5 people | <u>\$230/yr.</u> |
| <input type="checkbox"/> PLAYER - admits 6 people | <u>\$265/yr.</u> |
| <input type="checkbox"/> EXPLORER - admits 7 people | <u>\$300/yr.</u> |
| <input type="checkbox"/> ADVENTURER - admits 8 people | <u>\$335/yr.</u> |
| <input type="checkbox"/> HONOR ROLL - admits 6 & includes a birthday party | <u>\$500/yr.</u> |

ADD-ONS *(can add-on to any of the above memberships)*

- | | |
|--|-----------------|
| <input type="checkbox"/> GRANDPARENT CARD | <u>\$35/yr.</u> |
|--|-----------------|

Grandparent Name

Address

City/State/Zip

- | | |
|--|-----------------|
| <input type="checkbox"/> NANNY CARD | <u>\$50/yr.</u> |
|--|-----------------|

Nanny Name

Total

\$

(Memberships + Add-On)

IS THIS A NEW MEMBERSHIP OR A RENEWAL?

- New Renew

PAYMENT

- Amex Discover MasterCard Visa Check

(Checks payable to Children's Museum of Phoenix)

Card Number

Expiration

Signature

Date

By signing above you authorize the Children's Museum of Phoenix to charge your credit card for the amount indicated. You also understand that one of the named cardholders MUST be present at time of entry, and show photo ID, in order for anyone to gain admittance into the Children's Museum of Phoenix using your membership.

MEMBERSHIPS ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

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NAME(S) TO APPEAR ON MEMBERSHIP CARD(S)

Maximum 2 named adults. Must reside in same household and be a direct relative.

1st (Primary) Adult's Name

2nd Adult's Name

Relationship of 2nd Name to Primary?

Address

Check if this is a new address

City/State/Zip

Home Phone

Cell Phone

Email*

**Providing your email address will keep you up-to-date on all Museum activities!*

OPTIONAL:

Child's Name

M / F

Birth Date (MM/YY)

Child's Name

M / F

Birth Date (MM/YY)

IF THIS IS A GIFT

Your Name

Address

City/State/Zip

Home Phone

Cell Phone

Email

Gift Message

FINISHED? Give completed form to one of our Visitors Services Associates at the front desk or mail it to: Children's Museum of Phoenix, 215 N. 7th Street, Phoenix, AZ 85034, Attn: Memberships.

Thank you.