



Every Child Program Application for Free Admission

The *Children's Museum of Phoenix* Every Child Program ensures that all members of the region can experience the rich learning environment of the Museum's exhibits and programs. Within the Every Child Program application, the *Children's Museum of Phoenix* is committed to distributing free admissions annually to organizations working specifically **with low income or at risk children ages 0-10 that work with homeless families, children in foster care, children that have been abused and neglected, and children with disabilities**. Every Child admissions are allocated on a first-come, first-serve basis. The **Every Child Program is not for personal use, schools, daycare centers, training purposes, etc.**

Please return this completed application and proof of 501 (c) 3 non-profit organization/Tax Exempt status by e-mail to:

Partner Relations Coordinator, Marisa Camarillo, at mcamarillo@childmusephx.org with the subject line "*Every Child Application with Name of Org*".

Organization Name: _____ Address: _____ City: _____ Zip: _____

Contact Name: _____ Contact Title: _____

Work Phone Number: _____ Work E-mail: _____

Please describe the population you serve (low-income, foster care, shelter): _____

Has your organization been part of the *Every Child Program* in the past? ☐ Yes ☐ No

Please select which you are applying for:

☐ **Free Passes:**

How many free passes would you like to request? _____ (Free passes are to be used on an individual basis; not as a means for a group visit larger than 20 visitors.)

OR

☐ **ONE Free Group Visit/Field Trip:**

Children must be 0-10 years old. A minimum of 15 children must be present. A minimum of 1 adult to 5 children ratio is required. Private rooms are not included. ***Please note due to high volume in visitation Every Child Program Group Visits/Field Trips will not be valid April-July.**

How many adults (16 years old +) _____ and children _____ would you like to request? Preferred Date of Visit: _____

Mode of Transportation? ☐ Bus ☐ Van ☐ Personal Vehicles ☐ Public Transportation

Signature: _____ Date: _____

PLEASE ALLOW 10 BUSINESS DAYS FOR PROCESSING (MON-FRI). Application results will be emailed. If awarded, admissions will expire one year from approval date. Organizations are welcome to apply once a year. We look forward to seeing your organization at the Museum. Thank you!

CMoP Use Only

☐ Approved ☐ Declined

Expiration: _____

EC Code: _____

Notes: _____