

# Membership Application



ADULT NAME \_\_\_\_\_

SECOND ADULT NAME \_\_\_\_\_

RELATIONSHIP BETWEEN NAMED ADULTS \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

NUMBER OF CHILDREN \_\_\_\_\_ (Total number of children covered under the membership, include add-on's to this line.)

NAMES & BIRTH DATES \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ **# OF ADDITIONAL CHILDREN (\$25 fee applies. Families with more than three children in the household must add on additional members to receive free admission for the whole family each visit.)**

The children listed on this membership are my: \_\_\_\_\_ Children \_\_\_\_\_ Grandchildren

\_\_\_\_\_ **Dual Membership: \$125**  
Two named adults + Three additional family members. *ASTC/ACM reciprocity is not available on this level.*

\_\_\_\_\_ **Reciprocal Membership: \$150**  
Two named adults + Three additional family members. ASTC and ACM reciprocity included.

\_\_\_\_\_ **Animal Sponsor Membership: \$250**  
Two named adults + Three additional family members. ASTC and ACM reciprocity included. Choose your favorite animal and be recognized as a \$100 Animal Sponsor for one year.

\_\_\_\_\_ **SPONSORED ANIMAL NAME** \_\_\_\_\_

\_\_\_\_\_ **# OF ADDITIONAL ADULTS OR CAREGIVERS (\$25 fee applies. An additional adult add-on must be purchased if the adult will be visiting without the primary named adults.)**

\_\_\_\_\_ **ADDITIONAL ADULT AND/OR CAREGIVER NAME/S** \_\_\_\_\_

<h3>Standard Benefits</h3> <ul style="list-style-type: none"> <li>• A full year of free, unlimited admission to The Children's Museum in West Hartford &amp; Roaring Brook Nature Center in Canton</li> <li>• Two, one-time use, complimentary guest passes for use at either of our locations</li> <li>• \$10 off a \$20 purchase coupon for TCM/RBNC gift shops</li> <li>• \$5 off TCM &amp; \$2 off RBNC guest admissions</li> <li>• 10% discount in our gift shops</li> <li>• Reduced cost on programming (camps, birthday parties, nature walks, special events)</li> <li>• Invites to 'Members Only' hours and events</li> <li>• E-blast subscription with the latest goings-on</li> </ul>	<h3>Additional Reciprocal Benefits</h3> <ul style="list-style-type: none"> <li>• All standard benefits plus-</li> <li>• Free admission to over 200 museums and science centers around the world through our relationship with The Association of Science and Technology Centers (ASTC, Travel and location exclusions apply)</li> <li>• 50% up to 6 people at museums participating in the Association of Children's Museums Reciprocal Network (ACM)</li> </ul> <p><i>*Family members can be Children, Caregivers, Au Pairs, Ex-Spouses, Partners, or Grandparents.</i></p> <p><i>**2 named adults and 3 additional family members PER VISIT. An add-on must be purchased to receive free admission for more than what is covered under the membership.</i></p> <p><i>***An add-on must be purchased if the adult will be attending the museum without the primary named adults.</i></p>
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Mail completed application to: The Children's Museum, Attn: Membership, 950 Trout Brook Dr., West Hartford, CT 06119

<b>Total Payment: \$</b> _____	<b>Method of Payment</b> <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	<b>FOR OFFICE USE ONLY</b> Date: _____ Purchased at: _____ Paid by: _____ Check #: _____ Amt: _____ Date Dep: _____ Computer entry on: _____ Exp. Date: _____ Card mailed on: _____
Credit Card # _____ Exp. Date _____ CVV2# _____ Signature _____		