



Terre Haute Children's Museum Membership Application

1. Is this a **NEW** membership or a **RENEWAL** ?

2. Would you like a **FAMILY** or **GRANDPARENT** membership?

FAMILY MEMBERSHIP: Includes unlimited admission* to THCM for 2 named adults and all children from the same household under the age of 18. All parties must live in the same household. *Excludes field trips and some special events

GRANDPARENT MEMBERSHIP: Includes unlimited admission* to THCM for 2 named adults from the same household and **ALL** grandchildren under the age of 18.

*Excludes field trips and some special events

3. Would you like your membership to be for 1 year or 2 years?

FAMILY

1 year: \$125 **OR** 2 years: \$225

GRANDPARENT

1 year: \$150 **OR** 2 years: \$270

4. Does another adult bring your children to the Museum? Would you like to add a "Nanny" or additional Cardholding Adult?

YES: \$20 **NO**

5. Do you like to bring friends or with you to the Museum? Would you like to add a Guest?

YES: \$20 **NO**

6. Is this membership a gift for another family?

YES **NO**

IF YES: _____
Your Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip: _____
Card mailed to you? Yes No, to recipient

Please PRINT Clearly

Date: _____

Cardholders' Names: 1) _____ 2) _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Nanny Option (Question #4): 1) _____

Children covered under Membership

All kids must live in same household with adults

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Add questions 3, 4 & 5 for your

Total Payment Amount: _____

Method of Payment

Cash Check # _____

Credit (V/MC/D only) # _____

Exp: _____ Security Code: _____

For Museum Use Only

| | | | |
|--|---------------------------------------|---|---|
| <input type="checkbox"/> Application Received By _____ | <input type="checkbox"/> Card Printed | <input type="checkbox"/> Card Issued | <input type="checkbox"/> Card(s) Mailed on _____ |
| <input type="checkbox"/> Card Expiration: _____ | <input type="checkbox"/> Data Entered | <input type="checkbox"/> Receipt Attached | <input type="checkbox"/> Gift Certificate # _____ |