

MEMBERSHIP APPLICATION

Membership Categories (Please Check)

- Passenger \$30.00
- Planetarium \$45.00
- Family \$55.00
- Conductor \$100.00
- Patron \$250.00
- Andalo's Circle \$500.00
- Museum Contributor \$1,000.00
- Additional Contribution for Children's Museum Renovation Project \$ _____

Are you renewing your membership? ____ Yes ____ No

Double Your Dollars!

If you or your spouse's company will match your gift, please enclose the matching gift form that should be available at the company's human resources office.

Payment Method

- Checks (Make payable to Portsmouth Museums)
- Cash (On-site only)
- Credit Card (Please check one): Visa Mastercard

Account Number: _____

Expiration Date: _____

Signature: _____

Total Amount: \$ _____

Mail to:

Membership Department of Museums
521 Middle Street
Portsmouth, VA 23704

Membership Information on page 2



Membership Information

Please print as you wish adult names to appear on the membership card.

Mr. & Mrs. Mr. Mrs. Ms. Dr.

Last Name: _____

First Name: _____

Additional First/Family Names: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____

Email: _____

Gift Membership Purchased By

Please complete the section above for the gift recipient and the section below for yourself.

Mr. & Mrs. Mr. Mrs. Ms. Dr.

Last Name: _____

First Name: _____

Additional First/Family Names: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____

Email: _____

Send membership packet to gift recipient or Send to me

Send renewal notice to gift recipient or Send to me

Official Use Only

Date Received: _____

By: _____

For more information call 757-393-8983 or to donate on the web visit us at www.childrensmuseumva.com.



**CHILDREN'S
MUSEUM
OF VIRGINIA**