



Children's
Discovery
Museum
of San Jose

YES . . . I want to become a Museum Member!

2 adults living in the same household and their children under 18 or

2 grandparents and their grandchildren under 18

① Select Your Membership Level New Member Renewal (Member ID# _____)

Membership benefits are listed on reverse.

\$150 Explorer's Circle
Membership



Family Membership (NOT tax-deductible)

\$99 Family

\$99 Grandparent

\$135 Family Plus

Contributing Memberships **Fully tax-deductible!**

\$250 Developer's Circle

\$500 Partner's Circle

\$1,000 Leader's Circle

\$10 Corporate Discount

Business Affiliation* _____

* Must be completed for \$10 off Corporate Discount. Discount applies only to Corporate Partner employees. Valid only on Family, Grandparent, and Family Plus Memberships.

② Member Information

Primary Cardholder Parent Grandparent

Children

Mr./Mrs./Ms. _____
First Name Last Name

Child's Name _____

Additional Cardholder

Child's Birthday _____

Mr./Mrs./Ms. _____
First Name Last Name

Child's Name _____

For Members at the \$135 level and above, please list the third adult:

Mr./Mrs./Ms. _____
First Name Last Name

Child's Birthday _____

Address _____

Child's Name _____

City _____ State ____ Zip _____

Child's Birthday _____

Home Phone () _____

Child's Name _____

Business Phone () _____

Child's Birthday _____

③ E-Mail Communication

Please send my Members' Only e-newsletter, information regarding special events and renewal notices to this e-mail address:

Member E-mail Address _____

④ Member Agreement

• I understand that my membership benefits are only for those adults and children listed on this membership application and that my membership cards are **not transferable** to others under any circumstances.

• I understand that I will be asked to provide photo identification when I present my membership card at the admissions desk.

• Please be advised that Children's Discovery Museum of San Jose generally closes for one to two weeks during the year for refurbishment.

• All prices are subject to change

• Membership not valid on group rate (field trip) visits. Group rate is not applicable toward membership.

• I understand that memberships are **non-refundable**.

Member Signature _____

For more
information:

www.cdm.org/membership

(408) 298-5437
ext. 245

180 Woz Way
San Jose, CA 95110

Accounting Use Only

Date: _____ Sold by _____ Amount Redeemed \$ _____ Check Cash Credit Card