



Annual Membership Registration

432 Fashion Way Burlington, WA 98233 (360)757-8888 www.skagitchildrensmuseum.net info@skagitcm.org

Date: _____ New Renewal Member # _____

Membership Type: _____ **Expiration Date:** _____

- Salmon (\$105/year) Military Salmon (\$95/year) Bear Cub (\$165/year) Eagle (\$275/year)
- King Salmon (\$135/year for **2** families) Add A Family (with King Salmon \$45/year for **3** families)
- Welcome to the World (\$125) Birth to age 2 Museums for All (EBT/WIC) (\$30/year)
- Childcare Provider (\$135/year) Childcare Name: _____
- Organizational Partner (\$425/year) Organization Name: _____
- Orca Lifetime (\$5000) Thank you for your support! Corporate Membership Level: _____

Parent(s)/Guardian(s) Information – please print – as you would like for it to appear on membership cards

▶ _____
LAST NAME **FIRST NAME**

▶ _____
LAST NAME **FIRST NAME**

▶ _____
 Mailing address

▶ _____
 City State ZIP

▶ _____
 E-mail Addresses for Newsletters and Communication (Use separate sheet for more than two or three-thank you!)

▶ _____
 Phone: Home Work Mobile Phone: Home Work Mobile

▶ _____
 Children's Names (living in household)

▶ _____
 Children's Names (living in household)

▶ _____
 Additional Adults- who would regularly bring your child/children (grandparents, nannies)

I would like to donate my guest passes to the Scholarship Fund for children in need.

This is a gift membership from:

 Name

 Mailing address

 City State ZIP

 Phone Email

Mail membership to this address

NOTE: Memberships are non-refundable and non-transferable.

STAFF USE ONLY

PMT: CASH CHECK # _____ DATE: _____ REC'D BY: _____ PROCESSED: _____ COMPLETED: _____
 CREDIT JCB CERT # _____ NOTES: _____