



YES! I WANT TO BECOME A MUSEUM MEMBER

1 Select Your Membership Level- All family members are named

Membership benefits listed on back >>

- \$65 **Play Date Membership** \$90 **Family Membership**
- \$125 **Family Plus Membership** \$250 **Family Premier Membership**

FOUNDING FAMILIES: Limited to the first 500 donations of \$500.00 or more

- \$500 to \$999 **Let's Explore!** \$1,000 to \$2,499 **Let's Create!**
- \$2,500 + **Let's Inspire!** Other

Enclosed is my gift of \$ _____

2 Member Information

Primary Cardholder- Additional card holders may be added for \$25 each in addition to any membership that has 2 already named card holders. Please list additional card holders under "Membership Add-On" section with CG in birthday.

Mr./Mrs./Ms. _____

First Name

Last Name

- Parent Grandparent Caregiver

Second Cardholder (if applicable)

Mr./Mrs./Ms. _____

First Name

Last Name

- Parent Grandparent Caregiver

Please send my e-newsletter, information regarding special events and promotions to:

Member E-mail Address: _____

Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____

Alternate Phone (_____) _____

Children

Child's Name _____ Birthday _____ Child's Name _____ Birthday _____

Child's Name _____ Birthday _____ Child's Name _____ Birthday _____

Membership Add-On: \$25.00 per additional Member. May only be purchased in addition to a Family Plus Membership.

Name _____ Birthday _____ Name _____ Birthday _____

3 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 memberships are **non-refundable**.
- I understand that I will be asked to provide photo identification when I present my membership card at the admissions desk.
- Membership not valid on group rate (field trip) visits. Group rate is not applicable toward membership.
- Email addresses are kept strictly confidential.
- All prices are subject to change.

Member Signature _____ Date _____

FOR MORE INFORMATION:

E-MAIL:
memberships@sackids.org

CALL:
916-638-7225

VISIT US:
2701 Prospect Park Dr.
Rancho Cordova, CA 95670

Accounting Use Only

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

MEMBER BENEFITS	FAMILY PREMIER MEMBERSHIP	FAMILY PLUS MEMBERSHIP	FAMILY / PLAY DATE MEMBERSHIP
UNLIMITED FREE ADMISSION One year for designated family members	6	6	4 / 2
MEMBERS ONLY HOURS Designated Members only hours to be announced in e-newsletter	●	●	●
SUBSCRIPTION TO E-NEWSLETTER E-mail address required	●	●	●
MEMBER DISCOUNTS Programs, birthday parties, classes, camps and workshops	●	●	●
INVITATION TO MEMBERS' ONLY EVENTS Exhibition previews and celebrations	FREE	FREE	NOMINAL FEE
MUSEUMS NATIONWIDE Free admission to participating museums. Contact the museum before visiting; the number of admissions may be limited. www.childrensmuseums.org/visit/reciprocal.htm	●		

FOUNDING FAMILY BENEFITS	LET'S INSPIRE!	LET'S CREATE!	LET'S EXPLORE!
UNLIMITED FREE ADMISSION One year for designated family members with a Family Plus Membership	6	6	6
COMPLIMENTARY FAMILY PASSES Single visit guest passes for up to 4 guests	●	●	●
MEMBERS ONLY HOURS Designated Members only hours to be announced in e-newsletter	●	●	●
SUBSCRIPTION TO E-NEWSLETTER E-mail address required	●	●	●
MEMBER DISCOUNTS Programs, birthday parties, classes, camps and workshops	●	●	●
INVITATION TO MEMBERS' ONLY EVENTS Exhibition previews and celebrations	●	●	●
ADDITIONAL COMPLIMENTARY ADMISSIONS Five additional complimentary single visit passes for up to 4 guests	●	●	
COMPLIMENTARY BIRTHDAY PARTY One Birthday Party at SCM with Museum Birthday Host	●		