

# JOIN THE MUSEUM!

*Get free admission for you and your family into over 270 other nature and science museums when you join the Museum!*

Members at the Associate level and above benefit from the Association of Science and Technology Center (ASTC)'s Passport Program. For a list of participating museums across the country and around the world see the ASTC Passport program web site at: <http://www.astc.org/members/passlist.htm>

Return this form to:  
H.S.U. Natural History Museum  
1315 G Street  
Arcata, CA 95521

or, contact us at  
707-826-4479

Thank you!

## Individual \$30, Student/Senior \$20

License plate frame, newsletter 10% store discount, program discount invitation to special events, museum poster

## Associate \$45

Free admission for family to 270 ASTC passport program museums, license plate frame, newsletter 10% store discount, program discount invitation to special events, museum poster.

## Friend \$75

Museum mug, free admission for family to 270 ASTC passport program museums, license plate frame, newsletter 10% store discount, program discount invitation to special events, museum poster.

## Sea Star \$100

All Friend benefits and museum tote bag

## Sand Dollar \$365 (Dollar-a-day)

All Friend benefits and a silver nautilus pin

## Nautilus (lifetime) \$750

All Friend benefits, a silver nautilus pin and name on Nautilus donor plaque in Museum

## HSU NATURAL HISTORY MUSEUM MEMBERSHIP FORM



Please Indicate:  New Membership  Renewal Membership Today's Date \_\_\_\_\_

**Membership Level** (Please Choose):

- Associate \$45                       Friend \$75                       Nautilus Club \$750  
 Individual \$30                       Sea Star \$100                       Additional Tax-Deductible Contribution \_\_\_\_\_  
 College Student/Senior \$20       Sand Dollar \$365

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_ Cell \_\_\_\_\_

Email: \_\_\_\_\_

VISA/MC/DIS/AMEX# \_\_\_\_\_

Exp. Date \_\_\_\_\_

For Associate Level and Above	
Please list children under 12 years of age	
Name	D.O.B. (Month/Year)
EX: Jane Smith	3/01

Office Use Only:  ck  cc  csh

Date Rec'vd \_\_\_\_\_ Rec'vd by \_\_\_\_\_ Filled by  mem /  \_\_\_\_\_ Date Entered in Database \_\_\_\_\_

Gifts Given       List Given       Mem Card Given                      Event Code \_\_\_\_\_