



CORPORATE MEMBERSHIP Application Form

Today's Date ___/___/_____

Membership is: New Renewal

Community Catalyst \$2500

Partner \$1000

Contributor \$500

Basic Corporate Member \$250

Business Name _____ # of Employees _____

Contact Name _____

Business Address _____

City, State, Zip _____

Business Phone _____

E-mail _____

Yes, I would like to make an additional gift of: \$ _____

Make checks payable to: Mid-Hudson Children's Museum

We accept Visa, Mastercard and Discover

Card # _____

Exp. date MM/YYYY 3 digit security code _____

Name as it appears on card _____

Signature _____

Completed forms and payment can be mailed to:
Mid-Hudson Children's Museum
75 North Water St.
Poughkeepsie, NY 12601

Thank you for your support!