



CORPORATE MEMBERSHIP Application Form

Today's Date ___/___/_____

Membership is: New Renewal

Community Catalyst \$2,500

Partner \$1,000

Supporter \$600

Basic Corporate Member \$350

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, Discover and American Express.

Card # _____

Exp. date MM/YYYY _____

3 or 4 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 Street
Poughkeepsie, NY 12601

Thank you for your support!

Membership is non-refundable, non-transferable and subject to change.