

OKLAHOMA
WONDERtorium
 a children's museum... where wonder grows!
Membership Program

Benefits of Membership

- Unlimited General Admission for One Year
- Monthly eNews
- Priority Notification and Registration for Special Events and Camps
- Invitation and free admission to twice annual "Members Only" Events
- 10% off the cost of any birthday party or museum rental

Questions? Call (405) 533-3333

Membership Guidelines

- Individual members must be named at time of membership purchase and cannot be changed
- Named individuals do not need to be related or live in the same household
- Children must be accompanied and actively supervised by an adult at least 16 years of age
- Membership cannot be upgraded once purchased
- General admission may be refunded if membership is purchased on day of visit

Membership Levels

- Individual \$50 Family 1 \$150
 \$54.41 with tax \$163.22 with tax
 Admits 1 individual Admits 4 individuals: 3
 (adult OR child) named members and 1 guest.
- Family 2 \$200 "Grandparent" \$250
 \$217.63 with tax \$272.04 with tax
 Admits 6 individuals: Admits 6 individuals: 2
 4 named members and named members and 4
 2 guests. guests.
- Family 3 \$300 Scholarship Donor
 \$326.44 with tax \$500
 Admits 10 individuals: 6
 named members and 4
 guests.
- Family Level 3 + a tax-deductible donation which provides a Family Level 1 membership for a family in need.
 - 10% Gift Shop Discount
 - Named in Annual Report

Please check all that apply:

New: _____ Renewal: _____ Gift: _____

Gift Giver Information

Name _____
 Phone _____
 E-mail _____



Member Information:

Name _____
 Street _____
 City _____
 ST, Zip _____
 Phone _____
 E-mail _____

**Individuals to be named on membership:
 ONLY list the "named" people on membership!**

First/Last Name	Birthday (mm/dd/yyyy)
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

Make checks payable to:

Oklahoma WONDERTorium
P.O. Box 1299
Stillwater, OK 74076

STAFF USE ONLY

Date Membership Purchased: _____

Staff Member Selling Membership: _____ Date Eff: _____

AMT PD: _____ Credit Card _____

Cash: _____ Check #: _____ Gift Card #: _____

POS entry: _____ Excel entry: _____