MEMBERSHIP APPLICATION FORM

(Office use only)





FNAME	LNAME			Application Date
STREET	A	PT#		-
CITY			Initials	
STATE	ZIP			Yes, I would like to
PHONE				receive the digital Monthly
EMAIL				Member Magazine

Circle your level choice below

BASIC LEVELS

ANNUAL FEE	LEVEL	ADULTS	CHILD/ GRANDCHILDREN	COMP TICKETS
\$40	Student	1	х	Х
\$70	Individual	1	X	Х
\$90	Dual	2	X	Х
\$110	Family	2	4	Х
\$185	Ext. Family	4	6	Х
\$250	Contributor	4	8	Х
\$500	Patron	6	8	2
\$750	Benefactor	6	8	4

PREMIER LEVELS

ANNUAL FEE	LEVEL	MEMBER CARDS	HOLDAY NIGHTS TICKETS	COMP TICKETS
\$1,000	Bronze	10	20	10
\$2,500	Silver	10	20	10
\$5,000	Gold	10	20	10
\$10,000	Platinum	10	20	10

List Names for Basic Level Chosen (Premier will have same name on all)

ADULTS	CHILDREN/GRANDCHILDREN 1-17YRS.
1.	1.
2.	2.
3.	3.
4.	4.
5.	5
6.	6.
	7.
	8.