



THE MUSES

of the California Science Center Foundation

MEMBERSHIP FORM

The purpose of THE MUSES shall be to support and promote the California Science Center Foundation and its education programs for youth.

Name: _____
First MI Last

Spouse/SO: _____
First MI Last

Address: _____

City: _____ Zip+4 _____

Home Phone: _____ Fax: _____

Mobile Phone: _____ E-mail: _____

Date of Birth: Month and Day (Year optional): _____

I was introduced to THE MUSES by: _____

YES! I would like to become a member of THE MUSES at the following level (please check one):

Donor \$90 _____ **Sponsor \$140** _____ **Patron \$300** _____

Please make your check payable to THE MUSES (payment by check maximizes your donation).

Payment by Credit Card (a \$3.00 processing fee will be added to each transaction):

Mastercard _____ VISA _____ American Express _____ Discover _____

Name on Card _____

Credit Card Number _____ CVV _____ Exp. ____/____

Signature _____ Date _____ Billing Zip Code _____

A separate application for membership in the California Science Center (required) will be enclosed with your MUSES membership packet; you can also join online at <https://californiasciencecenter.org/support/join>.

We require all our members to support THE MUSES' annual fundraising event by purchasing a ticket or making a donation of equal amount to the Woman of the Year Award luncheon.

Please send this form along with your payment to:

THE MUSES, c/o Robin Gingold, 4071 Benedict Canyon Dr., Sherman Oaks, CA 91423
For questions, please contact Jennifer Saunders (213) 369-9988 | jusaunders88@yahoo.com

THE MUSES is a 501(c)(3) organization TIN 95-2210527
<https://californiasciencecenter.org/support/volunteer/the-muses>