



# memberships AT SLOCM

## playdate ----- \$65

INCLUDES 1 ADULT & 1 CHILD

- unlimited weekday visits
- \$1.50 off admission for your guests
- 10% off birthday parties & store purchases
- invitations to special members-only events

## you can play ----- \$95

INCLUDES 4 PEOPLE

- unlimited weekday visits
- \$1.50 off admission for your guests
- 10% off birthday parties & store purchases
- invitations to special members-only events

## play every day ----- \$120

INCLUDES 4 PEOPLE

- unlimited visits
- free or reduced admission to over 165 children's museums in the U.S.
- \$1.50 off admission for your guests
- 10% off birthday parties & store purchases
- invitations to special members-only events

## endless play ----- \$165

INCLUDES 6 PEOPLE

- unlimited visits
- free or reduced admission to over 165 children's museums in the U.S.
- \$1.50 off admission for your guests
- 10% off birthday parties & store purchases
- invitations to special members-only events

### to join

Purchase a membership by visiting ourfront desk with your completed application or calling (805) 545-5874. You can also fill out our online application at [slocm.org](http://slocm.org).

# membership APPLICATION

renewing membership       new member

- \$65 **playdate** 2 people
- \$95 **you can play** 4 people
- \$120 **play every day** 4 people
- \$165 **endless play** 6 people

ADDITIONAL MEMBERS CAN BE ADDED FOR \$25 PER PERSON \_\_\_\_\_ # added

## MEMBER NAMES

_____	_____	<input type="checkbox"/> child
first name	last name	<input type="checkbox"/> adult
_____	_____	<input type="checkbox"/> child
first name	last name	<input type="checkbox"/> adult
_____	_____	<input type="checkbox"/> child
first name	last name	<input type="checkbox"/> adult
_____	_____	<input type="checkbox"/> child
first name	last name	<input type="checkbox"/> adult

## CONTACT INFORMATION

\_\_\_\_\_ address

\_\_\_\_\_ city                      state                      zip

\_\_\_\_\_ phone

\_\_\_\_\_ email

## BILLING INFORMATION

visa card       master card       check

\_\_\_\_\_ card number

\_\_\_\_\_ expiration date       billing same as mailing

\_\_\_\_\_ billing name

\_\_\_\_\_ address

\_\_\_\_\_ city                      state                      zip

