



Membership Application

I am a: New Member Existing Member

Name:

Address:

City: State: Zipcode:

County: Phone:

Email Address:

Select Member Category:

Senior Citizen (62+)	\$25
Individual	\$35
Family or Grandparent	\$60
Whalewatchers	\$150
Stargazers	\$250
1890 Club	\$500
Carousel Circle	\$1,000

Method of Payment: Membership: \$

Check enclosed Visa Add a Guest (\$15): \$

MasterCard American Express Total: \$

Card Number:

Exp. Date:

You may print out this application and:

- Bring it with you to the Museum
- Fax it to: 616.929.1791
- Mail with check (payable to Grand Rapids Public Museum) to:
Grand Rapids Public Museum Membership Department
272 Pearl St. NW
Grand Rapids, MI 49504