



*Welcome! We look forward to having you join us as a Sciencenter member!  
The following information will help us process your new membership.*

## Step 1. Complete This Form

Adult Name: \_\_\_\_\_

Spouse/Partner (living in the same household): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

- Please subscribe me to *Sciencenter eNews* so I can learn of Sciencenter programs and events. I have listed my email address above.
- I would like to enroll my child(ren) in the Sciencenter Birthday Club (for children ages 3-12). They will receive a gift on their birthday.

Month Day Year

Child's first & last name: \_\_\_\_\_ Birthday: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Child's first & last name: \_\_\_\_\_ Birthday: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Child's first & last name: \_\_\_\_\_ Birthday: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

How did you learn about the Sciencenter's Membership Access Program?

## Step 2. Attach Letter

**Attach a copy of the letter you received from your child's school confirming his/her participation in its free/reduced price lunch program for this school year.**

## Step 3. Mail Your Form

**Mail your form and letter to:**

Christine Bissen  
Membership Access Program, Sciencenter  
601 First Street  
Ithaca, NY 14850