



MEMBERSHIP APPLICATION

Membership Level:

- Individual (\$35)
- Grandparent (\$50)
- Donor (\$250)
- Founder's Circle (\$1000)
- Family (\$60)
- Patron (\$100)
- Benefactor (\$500)

Your Name

Billing Address

City / State / Zip

Phone

Email

Type of Membership:

- New
- Gift
- Renewal

Recipient's Name *(if different from above)*

Address

City / State / Zip

Payment Method:

- Check
- Visa
- Mastercard

*Please make your check payable to: Toy & Miniature Museum

Card No.

Exp.

Signature

Membership Total \$ _____

Additional Donation *(tax-deductible contribution)* \$ _____

TOTAL AMOUNT \$

Please mail this form with payment to:

Toy and Miniature Museum
Attn: Membership
5235 Oak Street
Kansas City, MO 64112

