

MEMBERSHIP RENEWAL

MEMBER(S) NAME(S):

*Please indicate Mr./Mrs./Ms./Dr./Rev

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Business Phone: _____

Please list the name(s) and birthdates(s) of additional children (ages 1 – 17):

Child's Name: _____ B/D: _____ Child's Name: _____ B/D: _____

Child's Name: _____ B/D: _____ Child's Name: _____ B/D: _____

Email: _____

For Administration Use Only

Payment: \$ _____ Method: cash check credit card

Membership Type: _____ Card Number: _____

Membership Expiration Date: _____ Receptionist Initials: _____

POS CARD GMP ACK

Aloha!

The Children’s Discovery Center is a private, non-profit organization designed and built for the children and families to lean together through discovery and purposeful play. By signing this membership application, I agree to abide by the “house” rules and will work together with the Center to support its philosophy, mission and goals.

I understand that becoming a member of the Center is a benefit for my family. I also understand that the individuals listed on my membership card are the ones that receive member benefits, and that the memberships are non-transferrable. I will continue to present my photo I.D. and membership card at the ticket counter upon entry to the Center. Any child I may bring, other than my own, who is also a member, must be able to present his/her membership card or photo I.D. at the ticket counter in order to gain entry into the exhibit galleries and to be eligible for any member discount. If another family member or friend brings my child(ren), I must give them my membership card to use for my child(ren) in order for them to have entry into the Center in order to obtain their member discount.

As a renewing member, I will continue to receive free admission for one year, my new expiration date is _____. My membership entitles me to a free one-year subscription to the Center’s newsletter, and a 10 percent discount in the Center’s gift shop, “Just For You, Kid!” (card must be presented before purchase). I may also be eligible to receive free or discounted entry fees for workshops or special events, such as the Center’s annual Keiki Fun Run.

Once you agree to abide by the Center’s policies and procedures, please sign below. Your signature here acknowledges that you will communicate the terms of this agreement with all members who belong in my membership.

Signature: _____ Date: _____