

Your Personal Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Gift Recipient Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Membership Level

Choose your category and give benefits for the entire year!

- Individual** *(One adult or child)* **\$55**
- Duo** *(Two individuals)* **\$100**
- Basic Family** *(Two adults and up to four children under 18)* **\$140**
- Extended Family** *(Up to 10 individuals)* **\$240**
- Senior** *(One adult, age 62+)* **\$45**

Mail Gift Membership Package to:

Buyer

Gift Membership Recipient

Yes, I would like a complimentary subscription to *Popular Mechanics* No, thank you

Payment Information

- Cash (Please do NOT mail cash.)
- Check (Payable to Liberty Science Center)
- American Express
- Discover
- Mastercard
- Visa

Card Number: _____ Security Code: _____ Expiration Date: _____

Signature: _____

MAIL OR FAX THE COMPLETED FORM TO:

Attn: Individual Giving & Membership

Liberty Science Center • Liberty State Park • 222 Jersey City Boulevard • Jersey City, NJ 07305

Fax: 201.451.6383