

GIFT MEMBERSHIP FORM

GIFT GIVER INFORMATION	LSC Member? OYES ONO Account Number:			
Name:				
Address:				
City:		State:	Zip:	
Phone:				
GIFT RE(IPIENT INFORMATION				
Name (adult one):				
Name (adult two):(two adults sharing the same household may be listed on memb				
City:		State:	Zip:	
Phone:	Email:			
MEMBERSHIP LEVELS Choose your category and give terrific ber	nefits for the entire	year!		
FAMILY MEMBERSHIPS (includes named care	giver)	EMAI	IL GIFT MEMBERSHIP	LETTER TO:
 Family (Two adults and up to four children un Family Plus (Two adults and up to four child under 18, plus two guests per visit) 	•		BuyerGift Membership R	ecipient
*Friends Circle (Ten individuals)	\$575			
*Elevate your benefits as you become more involved with I	LSC! Visit lsc.org/members f	for details and informa	tion on higher levels of support	A R
ADULT MEMBERSHIPS Individual (One adult) Duo (One named adult and one guest)	\$85 \$165			
PAYMENT INFORMATION Check (Payable to Liberty Science Cent	ter)			Ska
○ American Express○ Discover	○ Master(Card O	Visa	
Card Number:	Security	/ Code:	Expiration Date	:
Signature:				

Questions? Contact Membership at 201.253.1439 or members@lsc.org