

GIFT MEMBERSHIP FORM

GIFT GIVER INFORMATION LSC M	ember? 🔿 YES 🔿 NO	Account Number:
Name:		
Address:		
City:	State:	Zip:
Phone:	Email:	
GIFT RE(IPIENT INFORMATION		
Name (adult one):		
Name (adult two):		
City:	State:	Zip:
Phone:	Email:	
MEMBERSHIP LEVELS Choose your category and give terrific benefits f	or the entire year!	
FAMILY MEMBERSHIPS (includes named caregiver)		MAIL GIFT MEMBERSHIP PA(KAGE TO:
 Family (Two adults and up to four children under 18) Family Plus (Two adults and up to four children under 18, plus two guest passes per visit) 	\$189 \$289	BuyerGift Membership Recipient
Friends Circle (Ten individuals)	\$500	
*Elevate your benefits as you become more involved with LSC! Visit ADULT MEMBERSHIPS	lsc.org/members for details an	nd information on higher levels of support.
 Individual (One adult) Duo (Two individuals) 	\$64 \$119	VAYA
PAYMENT INFORMATION Check (Payable to Liberty Science Center) 		
○ American Express ○ Discover	⊖ MasterCard	🔿 Visa
Card Number:	Security Code:	Expiration Date:
Signature:		

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

MAIL OR FAX THE COMPLETED FORM TO: Membership

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