

**Yes! I want to become a member of the Museum of Arts and Sciences.**

Please enroll me in the category indicated:

<b>Memberships</b>	<b>one year</b>	<b>Renaissance Society</b>	
<b>Student</b>	__ \$20	<b>Galileo</b>	__ \$200
<b>Senior Citizen Single</b>	__ \$25	<b>Copernicus</b>	__ \$500
<b>Senior Citizen Couple</b>	__ \$35	<b>Michaelangelo</b>	__ \$1,000
<b>Single</b>	__ \$30	<b>DaVinci</b>	__ \$5,000
<b>Family : # in family _____</b>	__ \$60	<b>Medici Lifetime</b>	__ \$10,000
<b>Friend of the Museum</b>	__ \$125		
<b>Corporate</b>	__ \$250		

Mr.  Mr. & Mrs.  Miss  Ms  Dr.

Name: \_\_\_\_\_

Street or P.O.  
Box: \_\_\_\_\_

City: \_\_\_\_\_

State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Employer: \_\_\_\_\_  
(for matching gift purposes)

**Please send a gift museum membership to:**

Name: \_\_\_\_\_

Street or P.O.  
Box: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Category of  
Membership: \_\_\_\_\_

Gift sent by  
(name) \_\_\_\_\_

Please send more information about:

- Gifts of land/real estate
- Matching gifts
- Honor / Memorial gifts
- Including the Museum in your estate plans

Please print out this application and send it  
with a check or money order payable to:  
**The Museum of Arts and Sciences**

The Museum of Arts and Sciences  
352 South Nova Road  
Daytona Beach, FL 32114

Membership contributions are tax deductible  
within the limits provided by law. If there are any  
questions, please call the membership office at  
(386) 255-0285 ext. 316

