

East Tennessee Discovery Center Membership Form

Complete this form and mail, with payment, to East Tennessee Discovery Center, P.O. Box 6204, Knoxville, TN 37914. Your membership cards and a list of participating ASTC centers will be mailed to you as soon as we receive this form.

Sign me up as a:

<input type="checkbox"/> Patron	\$500	<input type="checkbox"/> Family	\$50
<input type="checkbox"/> Friend	\$250	<input type="checkbox"/> Individual	\$25
<input type="checkbox"/> Supporter	\$100	<input type="checkbox"/> Student	\$15

new member Renewing member (renewal date: _____)

Name: _____

Spouse's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Child's Name	Birthday (month/day/year)
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_____	_____
_____	_____
_____	_____
_____	_____

Method of Payment:

Check (payable to Discovery Center)

VISA/Mastercard (circle one)

Card #: _____ Expiration date: _____

Cardholder's name: _____

In addition to my membership, I would like to contribute: _____

Instead of membership, I would like to contribute: _____