



Teacher Membership

To thank educators for all that they do, the Danville Science Center offers **teachers a free year** of unlimited opportunities to explore the world through science! Plunge to the depths of the ocean, explore what makes things go, journey through the stars, experience seasonal beauty, generate ideas, and harness your creativity with exhibits and experiences designed to pull back the curtain on our world. We even have an exhibit to help the earliest explorers discover STEM fundamentals through play.

MEMBERSHIP BENEFITS:

- Unlimited free exhibit admission for one year
- Dome and exhibit guest passes
- Free admission to more than 250 science centers, including nine in Virginia and 15 in North Carolina
- Free admission to and member benefits at the Science Museum of Virginia in Richmond
- Discounts on purchases made in the gift shop
- Invitations to exclusive premieres and events
- Discounts on classes, programs and birthday parties!

Note: Group reservations and partnership programs include special museum services and discounts; therefore, members visiting as part of a group must pay the group rate.

MEMBERSHIP LEVELS (valid school ID required)

Individual Educator FREE
All membership privileges plus two free exhibit and Dome guest passes for teachers currently working in a public or private school.

Upgrade to: Dual/Family\$25
All membership privileges for two adults and children under age 18 in teh household and four free exhibit and Dome guest passes. Add a grandparent or childcare provider for just \$15.

Associate\$60
All membership privileges for two grandparents, two adults and children under age 18 in the household and eight free exhibit and six Dome guest passes.

Questions? Call 434.791.5160 or visit dsc.smv.org

MEMBERSHIP APPLICATION PLEASE PRINT

Mr. Mrs. Mr. and Mrs. Miss. Dr. Other _____

Name _____

Spouse or Second adult _____

Address _____

City _____ State _____ ZIP _____

Phone (_____) _____

E-mail _____

Membership level _____

Renewal New Former member

Family members: *names and ages of children under age 18*

Add-on member: *(Include a grandparent or childcare provider for \$15.)*

EDUCATOR/SCHOOL INFORMATION (Valid school ID required)

Public/private school name _____

School system _____

Grade _____

School e-mail (required) _____

Address _____

City _____ State _____ ZIP _____

Phone (_____) _____

Membership total \$ _____

Additional tax-deductible contribution \$ _____

Total amount enclosed \$ _____

Cash Check MasterCard VISA

Please make check payable to Danville Science Center, Inc.

Credit card # _____

Expires _____ CVV _____

Signature _____

Please return to:
Danville Science Center
677 Craghead Street, Danville, VA 24541

Thank you for supporting the
Danville Science Center!