



Family Membership Form

Family DELUXE, Family PLUS, Family,
Educator Family, Single Parent Family

Type of Membership: _____

Primary Named Adults on the Membership:

List up to two named adults from the same household to include on the membership. Each will receive a membership card.

1. Full Name: _____ Birthday: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

2. Full Name: _____ Birthday: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Children 16-18 on the Membership:

List all children 16-18 from the same household with a state issued ID or Driver's License. Each child listed here will receive their own membership card, along with the same membership permissions as primary-named adults.

Children on the Membership:

List the full names of all the children under 16 who live in the same household as primary adults.

Family PLUS and Family DELUXE Members:

- **Adults are considered any member that is 16+ with a state-issued ID or Driver's license who has been issued their own membership card. This also includes Add-Ons on memberships.**
- Family PLUS and Family DELUXE Members can bring up to two unnamed guests of any age each visit.
- Unnamed guests can only visit the Museum with a named adult present.
- Children named on a membership will only be permitted to enter the Museum with a named adult from their membership
- Children will not be permitted to enter the Museum with an unnamed guest unless a named adult from their membership is also with them.
- Visitors must be at least 48 inches tall to play on the Second Floor.

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Additional Purchasing Option:

Adult Add-Ons, \$50 each

Add up to two additional named adults (i.e., babysitter) to your qualifying membership for \$50.00 each. Add-ons must be adults at least 16 years of age. No more than two Add-Ons permitted per membership. Additional named adults, "Add-Ons," can visit independently from the primary named adult members. Add-Ons will receive their own membership card. Add-ons are required to show their membership card and valid photo ID to gain admission to Buckeye Imagination Museum

1. Full Name: _____ Birthday: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

2. Full Name: _____ Birthday: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Membership Conditions:

- Adult members are required to show their membership card, along with a valid photo ID each time they visit the museum, in order to gain admission.
- Children must be supervised at all times, and adults must be present. Buckeye Imagination Museum requires at least 1 adult for every 5 children.
- Guests will be charged for replacement of any items damaged. If guests do not treat exhibits or staff with respect, they will be asked to leave.
- Buckeye Imagination Museum reserves the right to revoke any membership without notice.
- Memberships, membership add-ons and reciprocal stamps are non-refundable.
- By signing this contract, you agree to abide by Buckeye Imagination Museum’s Rules of Play. You also agree to be responsible for any and all members and guests associated with this membership in terms of liability and financial responsibility. For a copy of this policy, see the front desk.
- By signing this contract, you agree to the Buckeye Imagination Museum Media Release Policy, which states that Buckeye Imagination Museum reserves the right to use any photos and videos taken on Buckeye Imagination Museum property of any and all members associated with this membership, and you waive all rights to those media. For the full policy, see the front desk.
- Buckeye Imagination Museum always believes in the safety of its guests and staff, and therefore will follow the Buckeye Imagination Museum Inclement Weather Policy and the Buckeye Imagination Museum Sick Guest Policy. For copies of these policies, please see the front desk.

PLAY AT YOUR OWN RISK

I have read and agree to the membership conditions above and attest that all the information provided is accurate and truthful.

Printed Name: _____

Signature: _____ Date: _____