

Membership Application

- Family Circle - ACM / Caregiver \$190
- Family - ACM \$140
- Parent-Child \$110
- Grandparent-Child \$75
- 5 - Visit Pass \$75



\$3 of every membership supports scholarships for low-income and special-needs families!

I'd like to add a tax-deductible gift to help Habitot even more! \$ _____

TOTAL ENCLOSED: \$ _____

Parent: _____
(Please Print)

Parent: _____

Child's Name: _____ DOB (mm/dd/yy) _____

Child's Name: _____ DOB (mm/dd/yy) _____

Child's Name: _____ DOB (mm/dd/yy) _____

Address: _____

_____ zip _____

Phone: _____

Sign me up for monthly Tot-Mail e-news

email: _____

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Administrative Use Only

New # _____

Renewal # _____

Exp. date _____

10-class pass? Yes No

2 individual passes? Yes No

paid date stamp