



Gift Membership Form

Yes! Please enter Gift Memberships for the following friends:

Name(s) _____ <small>Please enter names as you wish them to appear on membership cards.</small>
Address _____
City _____ State _____ Zip _____
Evening Phone _____ Daytime Phone _____ E-Mail _____
<input type="checkbox"/> New Membership <input type="checkbox"/> Renewal Membership Category _____
<input type="checkbox"/> Please bill me for renewal of this membership.

Name(s) _____ <small>Please enter names as you wish them to appear on membership cards.</small>
Address _____
City _____ State _____ Zip _____
Evening Phone _____ Daytime Phone _____ E-Mail _____
<input type="checkbox"/> New Membership <input type="checkbox"/> Renewal Membership Category _____
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Name(s) _____ <small>Please enter names as you wish them to appear on membership cards.</small>
Address _____
City _____ State _____ Zip _____
Evening Phone _____ Daytime Phone _____ E-Mail _____
<input type="checkbox"/> New Membership <input type="checkbox"/> Renewal Membership Category _____
<input type="checkbox"/> Please bill me for renewal of this membership.

These memberships are a gift from: _____

Please renew my own membership in the following category _____

Membership Categories

Individual	\$45.00	Sponsor	\$250.00
Student (full-time)	\$20.00	President's Associate/Corporate Friend	\$500.00
Family (2 adults & 2 children under 18 in household) ..	\$60.00	Patron/Corporate Sponsor	\$1,000.00
Friend	\$125.00	Los Compadres/Corporate Benefactor	\$5,000.00

Benefits increase at each level. Membership dues are deductible to the extent allowed by law.

Please send this form with your remittance to:

Membership
 San Diego Museum of Man
 1350 El Prado
 San Diego, CA 92101
 Phone (619) 239-2001 Fax 239-2749

Please make your check payable to the Museum of Man.

To pay by Credit Card, please provide the following information and mail or fax this form to the address at left.

I am paying with Visa MasterCard

Name as it appears on card _____

Card No. _____ Exp. Date _____ V-code* _____

*Your V-code is the last three digits of the number printed on the back of your credit card.

Authorizing Signature _____

Evening Phone _____ Daytime Phone _____ E-Mail _____