

Membership Enrollment Form

Yes! I would like to support the UWM Manfred Olson Planetarium.

	Price	Free admission to all planetarium shows	Invitation to members-only event	Free private program for up to 30 people
<input type="checkbox"/> UWM Student/Senior	\$15	★	★	
<input type="checkbox"/> Individual	\$25	★	★	
<input type="checkbox"/> Group (2 adults and 2 children)	\$50	★	★	
<input type="checkbox"/> Donor (Donor plus up to 4 guests)	\$200	★	★	★

My Membership Information*:

Name _____ E-mail _____

Address _____

*We do not share your information.

Gift Membership Information:

Name _____ E-mail _____

Address _____

Please send this form and a check payable to the **UWM Planetarium** to:



UWM Planetarium/Physics Department
 PO Box 413
 Milwaukee, WI 53201-0413

You may also bring this form and payment to any of our planetarium programs.
 We accept cash, check, or credit card.

PAYMENT

My Membership: _____

Gift Membership: _____

Total: _____