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Educator Membership Enrollment

Which Membership is best for you?

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Educator name _____

Second named adult _____

Number of (grand)children age 17 and under _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone _____

School information _____ Home school _____

School name _____

Address _____

City _____ State _____ Zip _____

Subject(s) _____

Grade level(s) _____

Educator credentials

(please attach a copy of one of the following)

- ☐ Teachers union card
- ☐ School ID card
- ☐ Documentation from school official
- ☐ Homeschool association/network membership card

Payment information

☐ Check payable to Cincinnati Museum Center

☐ Please charge a total of \$_____ to my:

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Member Services

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cincymuseum.org/join



The Children's Museum is a great place to have fun and learn. Exciting and enriching educational resources are available to incorporate into your curriculum.