



2704 Highway 6
 Vernon, B.C. V1T 5G5
 Phone/fax: (250) 545 3644
 Email: info@okscience.ca
 Website: www.okscience.ca

Mission Statement: "To inspire scientific inquiry through dynamic and educational programs and exhibits; to encourage children and adults to appreciate the relevance and universality of science, and its application in the Okanagan."

Vernon Science and Discovery Society Membership Registration

____/____/____
 Month / Day / Year

___ Individual One Year \$39.20 (\$35 + HST)** ___ Family One Year \$56.00 (\$50 + HST)** ___ First Time Member

___ Individual Three Year \$78.40 (\$70 + HST)** ___ Family Three Year \$112.00 (\$100 + HST)** ___ Renewal

___ Supporting Member, One Year \$112.00 (100 + HST)** minimum (see our website for details)

___ Caregiver add-on \$16.80 (\$15 + HST)** per year, per person added*

*up to two additional adults who accompany children to the OSC in place of parents (Nanny, Grandparent, Older Sibling, etc)

**prices in affect July 1, 2010 as per tax collection regulations due to implementation of the HST. For information, visit the BC Govt. Website.

Tax Deductible Donation (over \$10) : \$100 \$50 \$25 Other \$ _____

Total Enclosed: \$ _____

Please make personal cheques payable to "Okanagan Science Centre"

All information is kept strictly confidential.

Adult: _____

Spouse: _____

Street _____

City _____

Province _____

Postal Code _____

Phone _____

Alternate Phone _____

E-mail (used for OSC purposes only) _____

Family Membership: Please list your children (0-18 only) and birth month and year below.

Name _____	Month _____	Year _____	M <input type="checkbox"/>	F <input type="checkbox"/>	Name _____	Month _____	Year _____	M <input type="checkbox"/>	F <input type="checkbox"/>
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Name _____	Month _____	Year _____	M <input type="checkbox"/>	F <input type="checkbox"/>	Name _____	Month _____	Year _____	M <input type="checkbox"/>	F <input type="checkbox"/>
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Please DO NOT mail cash.

Membership is valid for one or three calendar year(s), beginning the date payment is received.

Membership provides admission at the Okanagan Science Centre and 300 other Science Centres worldwide.**

Please allow for processing if membership is sent by mail.

**Note that some institutions may have agreed to certain admission restrictions and are subject to change without notice.

Please check the OSC website at www.okscience.ca for more information

Signature: _____

OFFICE USE ONLY

Membership Number: _____ Processed/Initial: _____

Employee Issuing: _____ Till Receipt #: _____

Membership Expiry: _____ Method of Payment: Cheque/ cash VISA M/C Debit