



815 East Front Street, Suite 3 Missoula, MT 59802 406.721.7690 www.familiesfirstmontana.org

Thank you for your interest in an annual membership with the Children's Museum, Missoula. We hope that all of the Missoula community, regardless of circumstance, will be able to learn, play and imagine at the Museum. Sponsors help make this happen.

Funding for the sponsorship program is made possible thanks to the purchase of upper level memberships, corporate Helping Hand sponsorships and grants.

To help us get to know you better and to help with grant reports, please fill out the attached form and return it to the Children's Museum. A *Familyship* annual membership will be granted to your family, based on a sliding scale, upon your approved application and secured sponsorship funds. If there are no funds available, you will be placed on a waiting list and you will be notified.

The membership is good for two grownups and their dependent children living in the same household. Another benefit is that any caregiver can come in place of the adult(s) listed on the membership. We will be contacting you shortly in response to your application.

Sincerely,

Families First



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APPLICATION FOR SPONSORSHIP PROGRAM

Name: _____ Other Adult (Dependent Caregiver): _____
Address: _____ City & Zip _____
Phone: _____ Email: _____

Income Bracket:

- \$0 - \$15,000
- \$15,001 - \$25,000
- \$25,001 - \$35,000
- More than \$35,001

of people in family unit: _____

Are you currently receiving
governmental assistance? yes no

Names of (dependent) Children:

Birth Dates:

Are there circumstances that contribute to your need of a sponsored membership to the Children's Museum, Missoula?

Why would you like to have an annual membership to the Children's Museum, Missoula?

How often would you visit the Museum? _____

How much can you pay toward an annual family pass? _____

Signature: _____ Date _____