New York Transit Museum

YES, I WOULD LIKE TO BECOME A **LIBRARY MEMBER** OF THE NEW YORK TRANSIT MUSEUM!



\$200 Annual Library Membership

Library members receive two physical Family level membership cards or a barcode for Print on Demand ticketing systems.

Each membership provides free admission to the New York Transit Museum for 2 adults and up to 4 children under age 18 as well as a code good for \$5 off public programs and excursions (restrictions apply).

- O Physical membership cards
- O Digital Print on Demand

| CONTACT INFORMATION | | | | |
|---|--------------------------|--------------------------|-------------|---|
| LIBRARY NAME | | | | |
| CONTACT NAME | | | | |
| STREET | | | | |
| CITY | 9 | STATE | | ZIP |
| PHONE | | | | |
| EMAIL (This email address will be used for the | sole purpose of communic | cations between you | and the N | ew York Transit Museum) |
| MEMBERSHIP INFORMATION | | | | |
| O My check payable to Friends of the N e | ew York Transit Museu | m in the amount o | of \$200 is | enclosed |
| O Please charge \$200 to my credit card | O American Express | OMasterCard | O Visa | O Discover |
| | | | | |
| ACCOUNT NUMBER | | | | |
| EXPIRATION (MM/DD/YY) V C | ODE | | | |
| SIGNATURE | | | | Please mail your application and payment to: |
| BILLING ADDRESS (If different from mailing) |) | | | New York Transit Museum Membership 130 Livingston Street, 10th Floor |
| CITY | STATE | : | ZIP | Brooklyn, NY 11201 |