



Santa Barbara
Museum of Natural History
 & Ty Warner Sea Center

Membership Application

Completed application, appropriate membership fee (checks payable to SBMNH Nature Collection—no POs, please) should be mailed to: The Nature Collection, SBMNH, 2559 Puesta del Sol Road, Santa Barbara, CA 93105.

Individual Membership: \$ 60.00

Name: _____

Position/Title: _____

Home Address: _____

City & Zip Code: _____

E-mail: _____ Home Phone: _____

School Membership: \$ 300.00

Please note: Teacher/Staff roster must be attached to this application. Parents may come in to check in/out specimens, but must do so under the name of a teacher shown on the school roster. **All members on the roster will be required to sign understanding of financial responsibility and lending privileges on their first visit to the Nature Collection.**

School/Organization: _____

School Address: _____

City & Zip Code: _____

School Phone: _____

Contact Person: _____

E-mail Contact: _____

I understand that the objects I borrow may be of considerable value and I hereby agree to assume financial responsibility for overdue fines and/or in the event of their loss or damage.

Signature: _____ Date: _____

Office Use Only

Amount	Date	Entered by	Check #	Membership Expires