

# CORPORATE MEMBERSHIP

LEVELS AND BENEFITS	ASSOCIATE	EXECUTIVE	CHAIRMAN
	\$2,500 \$1,675 Tax Deductible Amount	\$5,000 \$3,225 Tax Deductible Amount	\$10,000 \$6,450 Tax Deductible Amount
Perot Museum general admission vouchers <sup>1</sup>	50	100	200
Invitations for <b>Designated Executive Sponsor(s)</b> to select Perot Museum VIP openings and events	■	■	■
15% discount on Perot Museum memberships; valid for all employees	■	■	■
Employee volunteer opportunities	■	■	■
Acknowledgement on the Annual Donor Wall	■	■	■
Acknowledgement as a Corporate Member on the Perot Museum website	■	■	■
Discount on facility rental fees at the Perot Museum <sup>2</sup>		5%	10%
Architecture Tour for a group of up to 20 individuals from your organization <sup>3</sup>		1	2

<sup>1</sup>Excludes special exhibitions, theater, and parking. <sup>2</sup>Additional event expenses are assumed by the client: discount applies to one event per year. Excludes Thanksgiving Day through New Year's Day. <sup>3</sup>Offered during Museum operating hours.

Note: company signage and website recognition will be placed in the Perot Museum and online at the discretion of Perot Museum staff.

## QUESTIONS?

### Please contact

Robert Ciccotelli  
 robert.ciccotelli@perotmuseum.org  
 214.756.5725



# CHOOSE YOUR CORPORATE MEMBERSHIP LEVEL

- ASSOCIATE \$2,500**     **EXECUTIVE \$5,000**     **CHAIRMAN \$10,000**

Corporation Name \_\_\_\_\_

Corporation Acknowledgement Name \_\_\_\_\_

Approximate Number of Employees: Locally (DFW area) \_\_\_\_\_ Globally \_\_\_\_\_

Corporation Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Corporation Website \_\_\_\_\_

## PRIMARY CONTACT

Name \_\_\_\_\_

Title \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

## PAYMENT OPTIONS (choose one of the following)

### CHECK

Enclosed is the check for \$ \_\_\_\_\_ payable to the Perot Museum of Nature and Science.

### CREDIT CARD

Please charge \$ \_\_\_\_\_ to the following credit card:

American Express     MasterCard     Visa     Discover

Decline benefits to receive a full tax deduction for the donation.

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name on Credit Card \_\_\_\_\_ Security Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### PLEDGE

Consider this the company's pledge for \$ \_\_\_\_\_. Please contact in (month) \_\_\_\_\_ for payment.

Signature \_\_\_\_\_

## PLEASE SEND FORM AND CONTRIBUTION TO

Perot Museum of Nature and Science  
**Attention:** Robert Ciccotelli  
2201 N. Field Street, Dallas, Texas 75201

