

Mobius Children's Museum
Scholarship Program
Family Membership Application



Adult names in same household: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Children under the age of 18 residing in the household:

Name: _____ Age: _____ M or F Name: _____ Age: _____ M or F

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Mobius Scholarship Program Guidelines

The Scholarship Program is available to participants who fall within our approved household income levels according to their household size and at least one of the following: * **Proof of income required with application. For household income levels or additional information, please visit the children's museum website at mobiuspokane.org, click the Members tab, then click the Scholarship tab.**

- Children who qualify for the free or reduced lunch program.
- Children attending learning centers, schools, or classrooms in which 50% of the population receive free or reduced lunch.
- Children attending daycare centers that receive State funding for at least 50% of their children.
- Children attending any Federal Even Start, Head Start/ECEAP, and Early Head Start Programs.
- Children identified by those social service agencies that assist families who are economically disadvantaged or considered at-risk.

I am requesting a:

Partial Scholarship: I can contribute \$ _____ Full Scholarship

Dependent children or family currently qualifies for: * *Proof of income required with application*

Free Lunch Program Reduced Lunch Program

Number of persons in the household: _____ Annual household income: _____

Which one of the following categories best describes your ethnicity: **(Optional)**

Caucasian Hispanic/Latino African American Native American Asian/Other

Your personal information will be kept confidential. However, we may publish or share demographic information to apply and qualify for grants and other funding sources.

Memberships

A Mobius Children's Museum Family Membership provides unlimited visits to the children's museum for six months and **includes two adults and up to 4 children under 18 in a single household.** Applicants are eligible to apply for two memberships per year, membership approval based on funding availability. Your new Mobius Children's Museum Membership will be mailed to the address submitted on application.

Please submit application to:

Email - info@mobiuspokane.org or by Mail - Mobius Children's Museum Attn: Karen Hudson, 808 W Main Ave LL015, Spokane, WA. 99201. For additional information please call 509-321-7121.

Please note: Scholarship memberships are approved on a first come, first served bases and can only be considered if there is funding available.