# CORPORATE MEMBERSHIP

## LEVELS AND BENEFITS

<table>
<thead>
<tr>
<th></th>
<th>ASSOCIATE $2,500</th>
<th>EXECUTIVE $5,000</th>
<th>CHAIRMAN $10,000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Perot Museum general admission vouchers</strong>¹</td>
<td>50</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td><strong>Invitations for Designated Executive Sponsor(s)</strong> to select Perot Museum VIP openings and events</td>
<td></td>
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<tr>
<td><strong>15% discount on Perot Museum memberships; valid for all employees</strong></td>
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<td><strong>Employee volunteer opportunities</strong></td>
<td></td>
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<tr>
<td><strong>Acknowledgement on the Annual Donor Wall</strong></td>
<td></td>
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<tr>
<td><strong>Acknowledgement as a Corporate Member on the Perot Museum website</strong></td>
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<tr>
<td><strong>Discount on facility rental fees at the Perot Museum</strong>²</td>
<td>5%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td><strong>Architecture Tour for a group of up to 20 individuals from your organization</strong>³</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

¹ Excludes special exhibitions, theater, and parking. ² Additional event expenses are assumed by the client: discount applies to one event per year. Excludes Thanksgiving Day through New Year’s Day. ³ 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