



## ACCESS MEMBERSHIPS

Access memberships provide access to the Wildflower Center for families or individuals who may not otherwise be able to visit due to financial constraints. The Center provides a safe, natural environment to be outside, learn, play and experience the health benefits of nature. As the Botanic Garden of Texas, we hope to instill in our guests a lifelong love of nature and to inspire the conservation of native plants.

### ACCESS MEMBERSHIP DETAILS:

**Eligibility** - Those who are currently participating in one or more of the following programs qualify for an Access membership:

- SNAP (Supplemental Nutrition Assistance Program, or Lone Star Card)
- STAR (State of Texas Access Reform Medicaid Program)
- CHIP (Children's Health Insurance Program)
- WIC (Supplemental Nutrition Program for Women, Infants, and Children)
- MAP (Central Health Medical Access Program)

**Pricing** - Tiered, pay-what-you-can cost of \$25, \$45 or \$65 per membership

**Entry** - Includes garden admission for up to six family members (cardholder plus five adults and/or children) per membership, per visit

### MEMBERSHIP BENEFITS:

- Free year-round admission
- Free admission to events such as Fortlandia (imaginative forts in our Texas Arboretum), Tuesday Twilights (spring and fall happy hours with live music and food trucks) and Dog Days (dog-friendly weekends)
- Discounts at biannual native plant sales, on Gift Store purchases, and on class and program registration fees
- Reciprocal admission to more than 300 North American botanic gardens and arboreta
- Discounts at associate nurseries nationwide
- Subscription to Wildflower, the Center's biannual member magazine

# ACCESS MEMBERSHIP APPLICATION

Date \_\_\_\_\_

## Annual Membership Level:

- \$25 Access membership
- \$45 Access membership
- \$65 Access membership

- This is a
- new membership
  - renewal/rejoin

## Member Information: \*Required

\_\_\_\_\_  
\*Primary member (must be an adult) Mr. / Mrs. / Ms. / Mx. / Dr.

\_\_\_\_\_  
\*Email

\_\_\_\_\_  
Additional member Mr. / Mrs. / Ms. / Mx. / Dr.

\_\_\_\_\_  
Second email

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
City / State / Zip

\_\_\_\_\_  
Phone home / work / cell

Check all that apply:  SNAP  STAR / Medicaid  CHIP  WIC  MAP  
Please be prepared to show proof of eligibility (verified by \_\_\_\_\_ )

## Payment Information:

- Cash  Check no. \_\_\_\_\_
- Mastercard  Visa  Discover  AmEx

\_\_\_\_\_  
Card number Expiration

\_\_\_\_\_  
Name on credit card

\_\_\_\_\_  
Signature

Memberships are good for one year from time of purchase. Memberships are non-transferrable. Photo ID may be required. Please allow 2 to 3 weeks for delivery of personalized membership card(s).

Sold by \_\_\_\_\_

By becoming a Wildflower Center member, you acknowledge you have read and will abide by the Center's values statement, which can be found at [wildflower.org/about/values](http://wildflower.org/about/values).