RISD MUSEUM

Membership Office 224 Benefit Street Providence, RI 02903

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Phone: 401 454 6321 Fax: 401 454 6802 member@risd.edu

Application for Library & Community Group Passport Program

We recognize and appreciate that libraries and community groups support the mission to make art and design more accessible to the broader community. The RISD Museum's **Passport Program** offers free admission passes to subscribing libraries and non-profit organizations at a heavily discounted rate. We are grateful for these partnerships that strengthen our creative community and help reach more visitors every year. Enroll today to make the RISD Museum an extension of your library or non-profit community group!

Policies

- Library and Community Group Passport subscribers receive sets of one-time use museum passes to distribute at their discretion.
- Each pass admits two adults for free per visit. Children 18 and under are always free. Passes are collected at the Visitor Services desk upon entry.
- Lost, stolen, or damaged passes will not be replaced.
 The complete barcode must be visible.
- Passes are valid for one year after date of issue.
 Expired passes are not accepted.
- Non-profit community groups planning to use passes for ten or more visitors at a time (for either a self-guided or guided visit) should schedule their group visit with Group Tours at 401 454 6534.
- An annual renewal notice will be sent, but organizations can resubscribe whenever passes run out. Consider upgrading to the next tier for the best value!

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Mailing Address				
City				
Contact Phone		Contact Emai		
Organization tax-	exempt identifica	ation number		
Select a membersl	hip tier:			
Passes admit 2 ad	ults. All youth and	l children 18 and under are admi	itted free.	
☐ Tier 1 \$150 40 one-time use FREE admission passes				
☐ Tier 2 \$250 90 one-time use FREE admission passes				
☐ Tier 3 \$325	150 one-time	use FREE admission passes		
Select an organiza	tion type (all that	apply):		
\square Library				
\square Adult day pro	gram			
☐ Adult residen	tial program			
\square Art program				
Other				
Select a method of	f payment:			
☐ Check				
☐ Credit Card				
Name on card	1			
Card number				
Exp. Date	CV	V code		
Signature		Date		
	payment to:			