

**Complete the
Membership
Application on the
reverse and
mail or deliver,
along with a check*,
to**

**H.M.S. Beagle
180 English Landing Drive
Suites 110 & 120
Parkville, MO 64152**

**For more information
please call:
816.587.9998
fax:
816.587.9997
or e-mail:
clk@hms-beagle.com**

***Memberships may be paid
by cash or credit card.**

H.M.S. Beagle
180 English Landing Drive
Suite 110 & 120
Parkville, MO 64152



THE BEAGLE SOCIETY

A SCIENCE CLUB FOR ADULTS

Membership Application:
Please fill in the following as completely as possible (please print clearly).

The Beagle Society offers an opportunity to be a part of a community of individuals with an abiding interest in all the sciences.

For an annual membership fee of \$25.00 per person or \$40.00 per household, members will be able to participate in events, presentations, lectures, workshops, trips and other, unique experiences. Through the Beagle Society, members can further their interests and satisfy their curiosities in everything from Astronomy to Zoology.

Bimonthly meetings will be on the third Monday at 7:00 PM in September, November, January, March, May and July. Each meeting will focus on a different science-related subject. Other events, including field trips, will be scheduled throughout the year. Each meeting will include a *Free-Range Science Discussion* where all opinions and comments are welcomed.

Member Benefits:

- ✓ Discounts on all purchases at H.M.S. Beagle.
- ✓ Free or discounted field trips and expeditions (e.g. the Great Montana Dinosaur Hunt).
- ✓ Three free Adult Science Workshops per year.
- ✓ *H.M.S. Beagle Science eNewsletter* with news of scientific discoveries and advances, book reviews, suggested reading lists and more.
- ✓ Speakers and presenters, of note, from local, regional and national organizations.
- ✓ Free entry in an annual *Adult Science Fair*.
- ✓ An opportunity to meet others with interests in the sciences and to exchange ideas and opinions on topics of the day.

Names:

(1) First: _____
Middle: _____
Surname: _____

(2) First: _____
Middle: _____
Surname: _____

Mailing Address: _____

(street or P.O. Box)

City: _____
State: _____ Zip Code: _____
Country: _____
(if other than U.S.A.)

e-Mail Addresses:

(1): _____
(2): _____
(Communications from H.M.S. Beagle will be by e-mail)

Telephone Numbers:

Home: _____
Office (1): _____
Office (2): _____
Cell/Mobile (1): _____
Cell/Mobile (2): _____
(be sure to include area codes)

H.M.S. Beagle

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