

MUSEUM MEMBERSHIP

CHECK THE APPROPRIATE BOX

☐ I AM ALREADY A MEMBER

☐ I WOULD LIKE TO BECOME A MEMBER*

☐ NOT AT THIS TIME

*SEE RIGHT FOR MEMBERSHIP LEVELS AND BENEFITS.

MEMBERSHIP IS NOT REQUIRED TO ATTEND CLASSES.
HOWEVER, IT PLAYS A VITAL ROLE IN THE HEALTH OF
THE HANSEN MUSEUM.
PLEASE CONSIDER MEMBERSHIP.

*By registering, I grant permission to the
Hansen Museum to use my name, voice, and
images of myself in any photographs, motion
pictures, publications, or any other print, video,
graphic, or electronic recording of this event for
legitimate purposes.*

CANCELLATION POLICY

WORKSHOPS WITH INSUFFICIENT
ENROLLMENT MAY BE CANCELED PRIOR TO
THE FIRST MEETING. REFUNDS ARE ONLY
GIVEN WHEN THE MUSEUM CANCELS A
WORKSHOP.

MUSEUM MEMBERSHIP

SEE BELOW FOR MEMBERSHIP BENEFITS

\$10 / YEAR · **BENEFACTOR**

5% DISCOUNT ON "ARTIST OF THE MONTH" PURCHASES

\$25 / YEAR · **PATRON**

5% DISCOUNT ON "ARTIST OF THE MONTH" PURCHASES

10% DISCOUNT ON MOST CONTINUING EDUCATION CLASSES

\$50 / YEAR · **SUSTAINING**

5% DISCOUNT ON "ARTIST OF THE MONTH" PURCHASES

25% DISCOUNT ON MOST CONTINUING EDUCATION CLASSES

MEMBERSHIP RECOGNIZED ANNUALLY IN NEWSLETTER



Hansen Museum

EST. 1972 | LOGAN, KS

OFFICE PHONE: (785) 689-4846

PHYSICAL: 110 WEST MAIN ST.

MAILING: P.O. BOX 187

LOCATION: LOGAN, KS 67646


WEBSITE: HANSENMUSEUM.ORG

HOW TO MAKE

EGG ROLLS

Thursday, March 14th from 6:00 - 8:30 PM at the Logan City Building

WHAT TO EXPECT



Egg rolls—YUM! Learn to make these popular appetizers with Anna Schremmer. Participants will learn how to prepare better-than-takeout egg rolls from scratch using fresh, high-quality ingredients. Anna will guide you through prepping, filling, rolling, and frying.

**Thurs., March 14th starting at 6:00^{p.m.}
Logan City Building
109 Mill Street in Logan, KS**

**Supply List:
Granny fork or Wooden spoon
Large mixing bowl
Cookie sheet
Cooling rack
Roll of paper towels
¼ Cup scoop or Measuring cup**

RETURN REGISTRATION & PAYMENT TO HANSEN MUSEUM PO BOX 187, LOGAN, KS 67646

REGISTRATION ONE PARTICIPANT PER FORM

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Email: _____

Phone: _____

TOTAL DUE

\$35.00

***REGISTRATIONS ARE
NON-REFUNDABLE***

OFFICE USE ONLY: EGG ROLLS

PAID: _____ CK#: _____

RCPT#: _____ DATE: _____