Donation Requests

The mission of The Woodlands Children’s Museum is to create opportunities that educate, empower, and excite children and families through play while inspiring a lifelong sense of wonder and discovery.

The Woodlands Children’s Museum enjoys giving back to our community and will consider donation requests from fellow non-profit organizations that support our mission. Each year, we provide complimentary day passes and workshop vouchers to assist with area fundraisers. Due to the volume of requests that we receive, organizations must meet the following guidelines to be considered:

- Request must be from a federally-certified 501(c)3 non-profit organization.
- The mission of the organization should be complimentary to The Woodlands Children’s Museum and have an education focus that serves children age 7 and under.
- Requests should be submitted at least 6 weeks prior to the event.
- One request per organization will be considered each calendar year.

All requests are evaluated on an individual basis. Submitting an application does not guarantee a donation. If we are able to assist your organization, we will contact you via phone or email. We are not able to respond to the high volume of inquiries regarding the status of an application.

To submit a request, please complete the attached Donation Application. Applications can be sent:

By Fax – Attn: Donation Requests, 281-465-0956

By Email – A PDF of the Donation Application can be emailed to museum@woodlandschildrensmuseum.org.

By Mail – The Woodlands Children’s Museum
4775 W. Panther Creek Drive, #280
The Woodlands, TX  77381

Requests are not accepted by phone.

If we are able to assist your organization, donations can be picked up at the museum’s front desk prior to your event. Day passes may not be redeemed at the museum for cash value. Additional fees may apply for special event days at the museum. Passes expire one year from the date they are issued.
Donation Application

Name of Organization _____________________________________________________________

Non-Profit Federal ID Number _ _ - _ _ _ _ _

Street Address _______________________________________________________________________

City ___________________________ County ____________________ Zip Code ___________

Contact Name ___________________________________ Title _______________________

Email _________________________________________ Phone _________________________

Mission of Organization:

______________________________________________________________________________

______________________________________________________________________________

Name of Event _________________________________________________________________

Date and Time of Event __________________________________________________________

Location ___________________________ Expected Attendance ________________

Description of Event

______________________________________________________________________________

______________________________________________________________________________

Please describe how the donation will be used (e.g. silent auction, raffle item, door prize, bundled with similar items, etc.).

______________________________________________________________________________

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How are you publicizing your event? What exposure will The Woodlands Children’s Museum receive and how will the museum be recognized?

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Have you applied for a donation in the past? If so, what was the name and date of the event?

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