



130 S. Laura
Wichita, KS 67211
www.wichitoytrainmuseum.org

New Member Application

Member Name: _____

Member Address: _____

Member Cell Phone: _____ Member Home Phone: _____

Member Email Address: _____

Spouse Name: _____ Spouse Phone: _____

Spouse Email Address: _____

Other Family Member Names: _____

Membership Dues are \$80 per household with a limit of two votes per household.

WTTTC/M Dues: \$ _____

Additional: \$ _____ Goes to General Fund unless specified
(ex. O-gauge layout, S-gauge layout, trailer purchase, etc.)

Method of Payment: Cash : _____ Check & Number : _____

Credit Card : **Complete the following ONLY if sending from off site.**

Card Number : _____ Expiration Date: _____

Security Code : _____

Liability Waiver: I (We) understand that as a member of this organization, I (we) waive any liability to person or property on the part of the Museum or Club. Should any loss or damage occur to my property in or about the property, WTTM/C shall not be held responsible in any way.

Turn page over for areas of interest. SIGNATURE _____

I (we) are willing to volunteer in the following areas: (Check all that apply)		Special Interests: (Check all that apply)	
Building & Restoration		Bench Work	
Running Trains		Wiring	
Displays & Artifacts		Track Work	
General Maintenance		Scenery & Building	
Planning & Development		Rolling Stock	
Gift Shop		Motive Power	
Fund Raising		Operations	
Other: Specify			

Date application approved by the general membership: _____

Secretary signature: _____