

# West Florida Railroad Museum Membership Registration Form

Mail to: West Florida Railroad Museum  
P.O. Box 770  
Milton, FL 32572

Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Street Address (or P.O. Box):  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Cell Phone (Optional): ( \_\_\_\_\_ ) \_\_\_\_\_

Occupation: \_\_\_\_\_ Age: \_\_\_\_\_

Dues \$30.00    Check \_\_\_\_\_    Visa \_\_\_\_\_    MCd \_\_\_\_\_

Credit Card Number \_\_\_\_\_  
(if paying by Visa or MasterCard)

Expiration Date: \_\_\_\_\_    Pin No. \_\_\_\_\_  
(extra 3 digits on back of card)

Signature: \_\_\_\_\_  
(Required if payment is by Credit Card)

Email: \_\_\_\_\_

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