NATIONAL RAILWAY HISTORICAL SOCIETY

RAPPAHANNOCK CHAPTER MEMBERSHIP APPLICATION

Please type or print legibly. Fill in all applicable data. Sign and date.

Name _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country (if not USA) _____

Additional Family Member Name (if joining) _____

Have you previously been a member of the National Railway Historical Society? ☐ Yes ☐ No

Optional Information

Telephone _____ Fax _____ E-Mail _____

Occupation or Special Talents _____

Membership

Regular	(**$15.00** Chapter + **$36.00** National)	$51.00 _____
Additional Family Member	(**$1.00** Chapter + **$5.00** National)	$6.00 _____
Special	_____	_____
Foreign Postage Surcharge (if not USA)		_____
	Total	_____

Please remit to: RAPPAHANNOCK CHAPTER, MEMBERSHIP CHAIRMAN
P.O. BOX 9088, FREDERICKSBURG, VA 22403-9088

I agree to abide by the Constitution & By-Laws of the National Railway Historical Society

Signature _____ Date _____

Thank you for your application - it is subject to the approval of a Chapter Officer.

Chapter Officer _____ Title _____

Office Use	Chapter		National						
						198			
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