

membership and member benefits expire.

## 1160 POINTCLEAR PL, #1618 HUNTSVILLE, AL 35824 770-278-0088 CONTACT@HERITAGERAIL.ORG

## **APPLICATION / INVOICE**

Please make checks payable to HeritageRail Alliance and mail to address at left OR submit online at <a href="https://www.heritagerail.org">www.heritagerail.org</a>

Legal Name of Organization:					
Mailing Address:					
City:	State/Province:	F	ostal Code:		
Name for Membership Certificat	e:				
Site Address (if different):					
Phone:	Web Site:				
General Contact's Name and Em	nail address:				
Billing Contact's Name (if different	ent from General Contact	: Person) and e-r	nail address:		
E-mail address(es) for member	communications (if diffe	rent from above)	):		
Demographic Questions:					
Do you have staff or volunteer	r that are experts in any	of the following	areas (Check all that a	apply)	
□ Services □ Parts □ Mer	chandise 🛮 🗈 Equipment	□ Fund Raisir	ıg 🗆 Other:		
Which of the following best de	scribes your organization	ı:			
□ Railway Museums □ Herit	tage Railroad 🛮 🗆 Electi	ic Railways 🗆	Other:		
Dues Schedule (Please check Operating Budget □ \$0 - \$50,000 □ \$51,000 - \$250,000 □ \$251,000 - \$500,000 □ \$500,000 +	Dues \$100/year \$200/year \$400/year \$600/year				
I, the undersigned, affirm that to of my knowledge.	the information contained	d in this applicati	on/renewal is correct	to the best	
Printed Name	Signat	ure	D	ate	
Dues are paid annually on the a	nniversary date. There	is a grace period	of 30 days after which	h the	