



# Nebraska Railroad Museum

Chapter of the National Railway Historical Society

1835 North Somers Ave.

Fremont, NE 68025

402-727-0615 www.FremontRailroad.com

## 2010 Membership Application

Have you always been fascinated with trains or railroad history? Would you like to have an active part in preserving an important link to our past? The Nebraska Railroad Museum operates the Fremont & Elkhorn Valley Railroad which provides a unique opportunity in Nebraska to experience railroad history through historic excursion train rides. Whether your interest in railroads is lifelong or brand new you can show your support for this important preservation work by becoming a member of the Nebraska Railroad Museum. Join today and support the preservation of a living piece of Nebraska history.

The Nebraska Railroad Museum is an officially chartered chapter of the National Railway Historical Society, a nationwide organization dedicated to the preservation of railroad history. The Nebraska Railroad Museum is a 501(c)(3) tax-exempt corporation and contributions to the NRM may be tax deductible.

### Membership Benefits

#### Local Supporter membership:

- Work on restoration projects and train crews
- Receive the regular Museum newsletter and email bulletins
- 10% discount on gift shop merchandise

#### Full National Railway Historical Society Chapter membership:

- All benefits of the Local Supporter PLUS
- Entitles you to attend Chapter membership meetings and vote on Chapter affairs
- Receive the NRHS National Railway Bulletin (published six times a year)
- Receive the NRHS News (News companion to the National Railway Bulletin)

#### YES, I'd like to join the NRM and help preserve our railroad heritage!

- Full NRHS Chapter Membership..... \$56 per year
- Additional Family member..... \$5 per year
- Local Supporter..... \$20 per year
- Additional donation to support the Museum's preservation work \$ \_\_\_\_\_
- Please send me information on volunteer opportunities at the NRM and FEVR.**

**PLEASE PRINT.** Return completed form to the NRM at the address above.

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

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

Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_\_) \_\_\_\_\_

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

**Payment:**  Check  Cash  Credit Card (Visa, Mastercard or Discover)

Credit Card Number: \_\_\_\_\_ Expiration Date (MM/YY): \_\_\_\_\_

Security Code: \_\_\_\_\_  
(3 digits on back)

Signature: \_\_\_\_\_

**Office Use Only** Rcvd \_\_\_\_\_ Check # \_\_\_\_\_ Entered \_\_\_\_\_ Card Sent \_\_\_\_\_ By \_\_\_\_\_