



Gulf Coast and Central Florida Railroad Museum Inc.
Membership Application / Renewal
 Year 20__

Applicant Information			
Name:		T-Shirt Size:	
Date of Birth:	Email:	Phone:	
Address:		Cell Phone:	
City:	State:	Zip Code:	
Spouse Information			
Name:			
Date of Birth:	Email:	Cell Phone:	
Children			
Name:	Date of Birth:	Name:	Date of Birth:
Name:	Date of Birth:	Name:	Date of Birth:
Name:	Date of Birth:	Name:	Date of Birth:
Emergency Contact			
Name:		Relationship:	
Address:		Phone:	
City:	State:	Zip Code:	
Membership Category: Member \$35 <input type="checkbox"/> Each Additional Member \$25 <input type="checkbox"/> Total \$ _____			

- I acknowledge that entering the Gulf Coast and Central Florida Railroad Museum to use and enjoy is at my own risk. This includes all the related entities and persons that serve or are connected with the Gulf Coast and Central Florida Railroad Museum facility.
- I agree that all time working on projects at Gulf Coast and Central Florida Railroad Museum is considered donated time and no expectation of compensation exists (implied or otherwise). Any exception must be approved by the Board and be documented to define the scope and budget of the project and must be signed by a board officer and the participant.
- I agree that any items donated to the Gulf Coast and Central Florida Railroad Museum will be considered a donation-in-kind and a letter acknowledging the donation will be issued. All donated items will become the property of the Gulf Coast and Central Florida Railroad Museum and may not be repossessed.

Signature of Applicant:	Date:
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Mail to: Gulf Coast and Central Florida
 Railroad Museum Inc.
 6470 CR 476 W
 PO Box 398
 Bushnell, FL 33513

Payment Options: Cash Credit Card
 Check (payable to Gulf Coast and Central Florida Railroad Museum Inc.)
 Visa MC Discover AMEX

Card # _____
 Exp Date _____ CVV _____
 Zip Code _____

Email To: BushnellStation@gmail.com