



P.O. BOX 1189  
COVINGTON, GA 30015  
770-278-0088  
CONTACT@HERITAGERAIL.ORG

## CANADIAN MEMBERSHIP APPLICATION

Please make cheques payable to HeritageRail Alliance and mail to address at left

Legal Name of Organization: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Name for Membership Certificate: \_\_\_\_\_

Site Address (if different): \_\_\_\_\_

Phone: \_\_\_\_\_ Web Site: \_\_\_\_\_

General Contact's Name and Email address:  
\_\_\_\_\_

Billing Contact's Name (if different from General Contact Person) and e-mail address:  
\_\_\_\_\_

E-mail address(es) for member communications (if different from above):  
\_\_\_\_\_

### Demographic Questions:

Do you have staff or volunteer that are experts in any of the following areas (Check all that apply)

Services    Parts    Merchandise    Equipment    Fund Raising    Other: \_\_\_\_\_

Which of the following best describes your organization:

Railway Museums    Heritage Railroad    Electric Railways    Other: \_\_\_\_\_

### Annual operating budget:

Less than C\$200,000: C\$100/year

C\$200,000 or more: C\$200/year

We realize COVID-19 related closures may create financial hardship, so from May 1, 2020 through May 1, 2021, HeritageRail offers an *optional* discounted membership rate reduction of 50% from the above dues. If you are able to pay in full, please do so in accordance with the above rate, knowing that funds will continue to be allocated for use to support affiliate partnerships, advocacy efforts, website, mailing, copy, printing, postage and other communications costs. Dues are paid annually on the anniversary date. There is a grace period of 30 days after which the membership and member benefits expire.

I, the undersigned, affirm that the information contained in this application/renewal is correct to the best of my knowledge.

Printed Name

Signature

Date