



BLUEWATER MICHIGAN CHAPTER, INC.
National Railway Historical Society



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CHAPTER MEMBERSHIP APPLICATION

Name _____ Spouse _____

Address _____

City _____ State/Prov _____ Zip/P.C. _____

Telephone _____ E-Mail _____

****Address changes must be sent to Bluewater separately from any notifications sent to NRHS for same.****

CHAPTER MEMBERSHIP ONLY

(Membership in NRHS is NOT included in these rates)

Visit www.nrhs.com to apply for/renew NRHS membership separately

Chapter Individual Membership.....\$25.00 **CHOOSE**
 ----- **ONLY**

Chapter Family Rate Dues Total...(in same household)\$30.00 **ONE**

Additional Donation to Chapter.....\$ _____

Make Checks Payable to: Bluewater Michigan Chapter, Inc. **TOTAL \$** _____

You may pay by Check, Money Order, MasterCard, Visa or Discover Card

Rev. 09/11/2015

Card Number _____ Exp Date _____

Signature _____ Date _____

**** Chapter Membership runs from January 1 to December 31 of the current year. ****