



MEMBERSHIP APPLICATION

Yes! I want to help Preserve Trucking History. Please enroll me as an Iowa 80 Trucking Museum member. (\$50.00 annual fee)

Membership Benefits:

- 10% Off in Gift Shop for One Year
- Iowa 80 Trucking Museum Hat
- Iowa 80 Trucking Museum T-shirt
- Notification of Special Events and New Exhibits

Fill Out Completely. Thank You!

Name _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email Address: _____

(I would like to receive all mailing via email.)

Gift Membership from: _____ (Recipient will receive an acknowledgement.)

Address: _____

City: _____ State: _____ Zip: _____

Payment:

Check or Money Order enclosed for \$ _____

Credit Card - Please charge my:

Mastercard

Discover

Visa

American Express

Account Number: _____

Expiration: _____

Signature: _____

Billing address

(if different than above):

Name _____

Address _____

City _____

State _____ Zip _____

Please return this form with payment to:

Iowa 80 Trucking Museum

PO Box 639

Walcott, IA 52773