

Connecticut Trolley Museum PO Box 360 58 North Rd East Windsor, CT 06088



## Join Now Or Renew Your Membership!



Connecticut Trolley Museum 58 North Road P.O. Box 360 East Windsor, CT 06088-0360

Phone: 860-627-6540 Fax: 860-627-6510 office@ct-trolley.org



## **Membership Benefits**

- Free Admission to the Connecticut Trolley Museum & Fire Truck Museum during regular operating hours
- 10% discount in Gift Shop
- CTM Newsletters & E-Blast
- Discount on Special Events
- Reciprocal programs with other local Museums during July & August



## Membership Categories

**Conductor:** Member receives one card issued in their name (17 or younger)

**Motorman:** Member receives one card issued in their name **(62 or older)** 

**Engineer:** Member receives one card issued in their name

Caboose: Two parents or Grandparents and up to four children/grandchildren (17 years old and under)

**Contributing:** Same benefits as Caboose **PLUS** 6 Special event Passes

**Supporting:** Card Holder can bring up to two guests per visit **PLUS** 6 Special Event Passes

**Sustaining:** Members will have the same benefits as Supporting **PLUS** a Guest Motorman Experience and additional support to the Museum

**Patron:** Members will have the same benefits as Sustaining **PLUS** a private car charter for twenty-five guests, ten Individual admission passes and additional support to the Museum



## Join or Renewal Application

	□ New		Renew	val	
	Conductor (17 or y	oun	iger)		30.00
	Motorman (62 or o	lde	r)*		35.00
	Engineer*				48.00
	Caboose*				70.00
	Contributing*				110.00
	Supporting* Sustaining*				250.00 500.00
	Patron*				1,000.00
*Automatically becomes a voting member at 18 or older upon renewal of membership after 12 full months of membership (membership dues are tax-deductible to the ex- tent allowed by law)					
I prefer my Membership Card to be sent via email					
I prefer Newsletters to be sent via email					
Name					
Address					
City_				Zip	)
Telephone ()					
E-Mail (print clearly)					
Membership Dues					
Donation (anonymous v here _ )					
TOTAL					
Payment by:					
Cash - Check - Visa - MC - DI - AMX					
Card/Check					
EXP Date					
Name on Card					
Signature					