Membership Form –	print and complete Prairie Aviation Museum Membership Application
Name	
Address	
City	
State	
ZIP	
Home Phone ()	
Cell ()	
Email	
	t to help preserve aviation history contribute \$
Please enroll me c Individual (\$	as a member in the following classifications 30 annually)
Youth under a	age 18 (\$15 annually)
Family – 1 or address (\$60 annually)	2 adults & children 17 and under living at the same
Volunteers ar some of my spare time to	e the backbone of the Museum. I would like to volunteer Museums projects
Please contac	t me concerning artifacts that I would like to donate
Method of Payment Check (payable to P	rairie Aviation Museum)

_____Visa _____MasterCard

Card #		 CVV
Expiration Date Mo	Yr	
Signature		

Date _____

Due to privacy laws, this information will not be used by anyone outside of the Museum.

Prairie Aviation Museum is a not-for-profit charitable organization under 501(c)(3) of the Federal Internal Revenue Code. Donations to the Museum may qualify as tax-deductible gifts.

After completing this form, please mail it to:

Prairie Aviation Museum 2929 East Empire Street Bloomington, IL 61704 Membership form 031419