



McKenzie River Drift Boat Museum Membership Application

List Name(s) as you wish them to appear on your membership card (Only one name for Statesman or Ensign Category)

Mr. ___ Mrs. ___ Ms. ___ Other _____

Member Name, First _____

Member Name, Last _____

Second Name, First _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

Email (print clearly*) _____

*We keep our members regularly informed of Museum events by email*_

Recipient will receive an acknowledgment of your gift

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

Email (print clearly) _____

Please check one of the following categories: Friends of the Museum

Family \$50 ___ Individual \$30 ___

You can also participate in a deeper level of financial support of the Museum:

___ Leadership society: \$100- \$500

___ Presidents circle: \$600- \$2,000

___ Master Visionaries: above \$2500

***** Payment Method *****

Check ___ MasterCard ___ Visa ___ American Exp ___ Discover ___

Credit Card # _____

Payment Amount ___ Expiration Date ___ Name on Card _____

Signature: _____

Return: by fax: 541.822.3625 or by mail: McKenzie River Drift Boat Museum, 49195 McKenzie Hwy, Vida, OR 97488.

Please call MRDBM with any questions: 541.822.3620. Phone is answered by Eagle Rock Lodge.