



Tri-State Model Railroaders Membership Application

(Dues are \$65 Per Year)

Date: _____

Name: _____

Spouse name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Cell: _____ Birthday (Month & Day only): _____

Make check payable to TSMRI

Mail to:

Tri-State Model Railroaders
6311 Lakeview Terrace
Douglasville, GA 30135