

# Michigan Museum of Military Transport Membership Application

I hereby apply for a(n)  Individual  Family  Lifetime (select one)  
membership in the Michigan Museum of Military Transport Foundation, Inc, a 501(c)(3) non-  
profit organization.

Full Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

My main military vehicle interests are (check all that apply):

- |                          |                          |                          |                          |                          |                                      |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>             |
| <b>Restoration</b>       | <b>Research</b>          | <b>Militaria</b>         | <b>Radios</b>            | <b>Modeling</b>          | <b>Military History</b>              |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>             |
| <b>1918-39</b>           | <b>WWI</b>               | <b>WWII</b>              | <b>Korea</b>             | <b>Viet Nam</b>          | <b>Current/Desert<br/>Storm/Iraq</b> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>             |
| <b>Jeeps</b>             | <b>Trucks</b>            | <b>Tracked</b>           | <b>Tanks</b>             | <b>Artillery</b>         | <b>Wheeled AFV</b>                   |

I currently own: \_\_\_\_\_

These vehicles are (check all that apply):

- |                          |                                             |                          |                         |                          |                             |
|--------------------------|---------------------------------------------|--------------------------|-------------------------|--------------------------|-----------------------------|
| <input type="checkbox"/> | <b>Fully Restored</b>                       | <input type="checkbox"/> | <b>Future Projects</b>  | <input type="checkbox"/> | <b>Parts Vehicles</b>       |
| <input type="checkbox"/> | <b>Daily Drivers</b>                        | <input type="checkbox"/> | <b>Lawn Decorations</b> | <input type="checkbox"/> | <b>My Kids' Inheritance</b> |
| <input type="checkbox"/> | <b>Just To Bug the Neighbors and Spouse</b> |                          |                         |                          |                             |

I will be happy to help with (check all that apply):

- |                          |                                    |                          |                              |                          |                   |
|--------------------------|------------------------------------|--------------------------|------------------------------|--------------------------|-------------------|
| <input type="checkbox"/> | <b>Site Selection Committee</b>    | <input type="checkbox"/> | <b>Budget Committee</b>      | <input type="checkbox"/> | <b>Color Tour</b> |
| <input type="checkbox"/> | <b>Vehicle Rescue and Recovery</b> | <input type="checkbox"/> | <b>Restoration Committee</b> | <input type="checkbox"/> | <b>Research</b>   |