

Quivira Chapter of the
Santa Fe Trail Association
MEMBERSHIP FORM

DATE _____

NAME _____

STREET/RR ADDRESS _____

CITY, STATE, ZIP CODE _____

EMAIL ADDRESS _____

Do you belong to the national Santa Fe Trail Association? Yes _____ No _____

What are your special interests in our SFTA Chapter? (such as tours, programs, mapping, history, preservation etc.)

Yearly dues: \$10 for an individual ora family membership.

Send, or give this form to:

(Make checks payable to: Quivira Chapter)

Linda Colle, President
Quivira Chapter of the SFTA
724 Penn Drive
McPherson, KS 67460