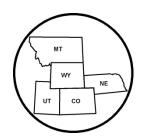


# **Rocky Mountain Division TCA**

http://www.rmdtoytrains.org



### **MEMBERSHIP INFORMATION - SPECIAL OFFER**

The *Rocky Mountain Toy Train Shows* are run by the Rocky Mountain Division of the Train Collectors Association (RMD TCA). In order to sell at our shows you must be a member of the Train Collectors Association (TCA), our national organization located in Strasburg, PA. RMD members receive the additional benefit of first choice of sales tables at all of our shows.

## TCA Membership Privileges

Sell trains at all TCA shows
Sell at & Attend TCA National Conventions
Run for TCA national office
Free TCA Museum admission
May purchase special TCA trains
Attend other TCA events not open to public
Receive TCA Quarterly Newsletter
Free ads in National Headquarters News
Vote on TCA matters
Estate settlement service

#### RMD/TCA Privileges

Get Rocky Mountain Toy Train Show Info 1st
Attend RMD/TCA member only Auctions
Get Rocky Mountain Toy Train Auction Info 1st
Run Trains on the RMD Modular Layout
Receive RMD Newsletter and Directory
Receive RMD "Tidbits" Email
Access member section of Web Site
Attend monthly Division meetings
Vote on Division matters
First chance on division car sales

## \*\*\*\* Special Offer! \*\*\*\*

New applicants to the TCA pay first year TCA dues of \$35\*. RMD first year dues of \$10 are *free*. After the first year annual TCA dues are \$50 and RMD dues are \$10. To take advantage of this special RMD membership offer fill out the attached *RMD-TCA Application* form and enclose a **check payable to "RMD-TCA" for \$35** or complete the Credit Card Payment slip below.

Mail the completed application form and payment to:

RMD-TCA Secretary Rocky Mountain Division TCA 15033 E. Crestridge Dr. Aurora, CO 80015

E-Mail Address: rmdmembership@rmdtoytrains.org.



# SHORT APPLICATION FOR RMD-TCA MEMBERSHIP

Train Collectors Association™, National Business Office, PO Box 248, Strasburg, PA 17579

#### Instructions for the completion of form:

- 1. All questions must be answered (*please print legibly*) and form signed by applicant.
- 2. **Applicant's dues payment** in cash or check made payable to **RMD-TCA**, must accompany this application. Dues are \$35 dues for the first twelve-month membership (\$50 thereafter); \$20 for a six-month trial membership; \$25 for a twelve-month, under-age-25 membership.
- 3. Applicant name, address, phone number and TCA number will be published to the entire membership during a probationary period. At the end of the probationary period the National Business Office will issue an Annual Membership card.

Applicant Name					
Street Address					
City	State	Zip	C	ountry	
Home Phone	Mobile	Phone			
Email Address		Spouse's N	ame		
Gender Date of Birth	n//				
Areas if Interest:					
I Was at mamparenin applicant for:	Membership MONTHS)	Full Memb		☐ Ju	inior Membership (12 MONTHS)
Have you ever been a member of the TCA be	fore? Yes	No 🗆			e eligible to TCA number!
Flections I prefer to vote:	I will be emailed a link to vote securely in each TCA Election		□ Ву	Paper	I will vote by a ballot mailed to me by TCA in each TCA Election
I hereby subscribe to the purposes, policie Association™ (TCA). I also understand and agree the TCA and its Divisions and Chapters in effect frocommittees and any actions and rulings of all TCA TCA-sponsored meet shall be sold on the basis the condition unless I have caused any such item to be	to the admission pro om time to time, spe Committees. I also at I represent that al	ocedures. I agree cifically including agree that all iter I such items are a	to comply all the rule ns sold by authentic a	with all of the sand regulate to any indicate methodally and in the methodally with the methodally all of the	the rules and regulations of lations of all TCA TCA Member or at any
Applicant's Signature:			Date:_		
"Win Big" Recruiter Info: Member Name				TCA#_	
Canal assumbated application with payment	4a. 🗖	MD TCA Coor	-4		

Send completed application with payment to:

RMD-TCA Secretary 15033 E. Crestridge Dr. Aurora, CO 80015 rmdmembership@rmdtoytrains.org.

CREDIT CARD PAYMENT SLIP FOR TCA APPLICATIONS					
Name (as appears on card)	Daytime Phone				
BILLING ADDRESS					
☐ Visa ☐ MasterCard Expiration Date_					
Credit Card #	- CCV#				
Signature					