National Churchill Museum Educator Club Membership Application

Name	
Position (ie: teacher, principal, homeschooler)	
Email	
Primary Phone	
Phone #2	
Address	
City State	zZip
School Name	
District	
Subjects Taught	
Grade(s) Taught	
Educator Club Membership	<u>\$25.00</u>
☐ Cash ☐ Check ☐ Credit Card: MC	Discover
	/
Credit Card Number	Exp Date
	P
	Office Only
	Date Received
	Date Processed
	Membership Number
	Staff Initials

Mail your application, proof of eligibility and payment to:

Teacher Membership Attn: Education Dept. National Churchill Museum 501 Westminster Ave Fulton, MO 65251

Or Fax it to: (573) 592-5222