



Dorothy  
Molter  
Museum

Reliving 50 Years In The Wilderness

Dorothy Molter Museum Membership Application

Name or Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

Day Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

Type of Membership (please circle): Individual \$25 | Family \$40 | Business \$100  
| | Paddler \$150 | Lifetime \$500 | Foundation Patron \$1000

Payment Type (please check):  Check  Credit Card

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Card Type (please check):  Visa  MasterCard

Expiration Date: \_\_\_\_\_

Checks should be made out to the Dorothy Molter Museum. Please do not send cash.

Mail the application to: Dorothy Molter Museum

PO Box 391

Ely, MN 55731.