



**MISSOURI RIVER OUTFITTERS
CHAPTER OF THE
SANTA FE TRAIL ASSOCIATION**

Membership Application

Name: _____

Street: _____

City, State, ZIP: _____

Phone: _____

Email: _____

**Dues: \$10.00 per year
(Individual or Family)
Make check payable to:
Missouri River Outfitters**

**Mail to: MRO
c/o Rich Lawson
612 Darrow Street
Warrensburg, MO 64093**