



FRRS Member Services

P. O. Box 608
Portola, CA 96122-0608
(530) 832-4131

Dear Prospective Member,

The spirit of the "*Willing People*" lives on at the Feather River Rail Society, operators of the Western Pacific Railroad Museum in Portola, California. We carry on that spirit volunteering at the museum or working offsite on a wide range of society activities. In addition to operating the museum, we are the caretakers of the history of the Western Pacific Railroad in our Historical/Archive Department. Regardless of task, profession, gender, age, or level of railroad knowledge, as members we volunteer our time and skills to continue that spirit started more than 100 years ago on the Western Pacific Railroad. We'd love to welcome YOU into our family!

Membership in the Feather River Rail Society is a rewarding experience. Your contribution will help to keep the museum and the history of the Western Pacific Railroad alive. Currently the society produces two publications which, depending on membership level, may be included with your dues. *The Train Sheet* is the society members' newsletter and provides current information concerning the Western Pacific Railroad Museum. *THE WESTERN PACIFIC Headlight* is the society's journal of WP history and includes articles of interest for modelers and those wishing to know more of the historical aspects of the Western Pacific and subsidiary roads.

FRRS members (except Institutional) receive free admission to the museum and train rides (cab rides are extra fare with member discount.) Members and their guests are encouraged to visit the museum and to join in the activities. Caboose trains operate every weekend during the summer operating season, in October as our "Pumpkin Express" trains and in December as seasonal "Santa Trains." Various project work parties are held year round. Join the society and join us as we preserve and share the spirit of the "*Willing People*" for generations to come.

Yes! I wish to join the FRRS at the following membership level:

Associate - \$25.00 annually (\$40.00 USD foreign)

- No voting rights
- Receives *The Train Sheet*
- Does not receive *The Headlight*
- Free admission and train rides (with membership card)
- May volunteer at the museum after signing a General Release form
- Cannot join the Operating or Mechanical Departments

Active - \$50.00 annually (\$65.00 USD foreign)

- Voting rights for one
- Receives *The Train Sheet* and *The Headlight*
- 10% discount in the Museum Store (with membership card)
- Free admission and train rides (with membership card)
- May volunteer at the museum
- Eligible to join Operating or Mechanical Departments

Family - \$80.00 annually (\$95.00 USD foreign)

- Covers two adults and all children 18 & under at same address
- Voting rights for two
- Receives two membership cards
- Receives one subscription to *The Train Sheet* and *The Headlight*
- 10% discount in the Museum Store (with membership card)
- Free admission and train rides (with membership card)
- May volunteer at the museum (some age restrictions)
- Eligible to join Operating or Mechanical Departments

Sustaining - \$150.00 annually (\$165.00 USD foreign)

- Voting rights for one
- Receives *The Train Sheet* and *The Headlight*
- 15% discount in the Museum Store (with membership card)
- Eight free train ride tickets for non-member friends and family
- Special recognition pin
- Free admission and train rides (with membership card)
- Priority tickets/notice on special museum events
- May volunteer at the museum
- Eligible to join Operating or Mechanical Departments

Life - \$1800.00 one time

(or 4 annual payments of \$450.00 *)

- Voting rights for one
- Receives *The Train Sheet* and *The Headlight*
- 15% discount in the Museum Store (with membership card)
- Special recognition pin and laminated membership card
- Free admission and train rides (with membership card)
- Priority tickets/notice on special museum events
- May volunteer at the museum
- Eligible to join Operating or Mechanical Departments

Family Life – details on next page

Institutional – details on next page

Family Life - \$3000.00 one time

(or 4 annual payments of \$750.00 *)

- Covers two adults and all children 18 & under at same address
- Voting rights for two
- Receives two membership cards
- Receives one copy each of *The Train Sheet* and *The Headlight*
- 15% discount in the Museum Store (with membership card)
- Special recognition pin and laminated membership cards for two adults
- Free admission and train rides (with membership card)
- Priority tickets/notice on special museum events
- May volunteer at the museum (some age restrictions)
- Eligible to join Operating or Mechanical Departments

Institutional - \$60.00 annually (75.00 foreign)

- Special membership for other 501(c)3 or equivalent organizations (verification required)
- No voting rights
- Receives both *The Train Sheet* and *The Headlight* (2 copies each)
- Twenty free train ride tickets for organization members and families
- Free Admission to WPRM Museum with identity card from member institution
- Institutional members are not eligible to volunteer

* - If making installment payments, the Life/Family Life membership card(s) will be sent upon receipt of the final payment. Until such time as the Life/Family Life membership is paid in full, the member will receive the equivalent yearly membership card. All payments towards a life membership are non-refundable and failure to make a scheduled payment by the due date will result in forfeiture of the funds paid towards the life membership. After the initial payment, future payments will be billed by mail. Please call the museum at 1-530-832-4131 for more information.

Make checks payable to FRRS. **May be tax deductible, ask your tax preparer or advisor.

Train Sheet delivery (please choose one):

[] email – faster and in color!

[] postal – paper in black & white

Name(s):

Additional Name for Family levels or Institution Name:

Address:

City: State: ZIP+4: Country:

Phone: Cell:

E-Mail:

Dues Paid \$_____

Extra Donation \$_____

Total Paid ** \$_____

International members please pay by credit card.

If you wish to pay with your **MasterCard** or **VISA** (circle one)

Card# Exp:

CCV Signature



FEATHER RIVER RAIL SOCIETY EMERGENCY FORM

FOR OFFICIAL USE ONLY

The following information is requested for use in the event of an emergency. Please update as changes occur.

Name: _____ Position: _____

Current Home Address:

Street: _____ Home Telephone Number: _____

City: _____ Zip Code: _____ Listed? Yes No

Birthdate: _____ Drivers License #: _____

In the event of an emergency, who should the FRRS notify? (Note: The second person will be called only if attempts to reach the first person are unsuccessful.)

1. Name: _____ Relationship: _____

Address: _____ Telephone: Home _____
Work _____

2. Name: _____ Relationship: _____

Address: _____ Telephone: Home _____
Work _____

Do you have a personal physician whom you want notified in the event of medical emergency?

Yes No

Physician's Name: _____

Address: _____

Telephone: _____

Medical Insurance Company(ies):

1. _____ Membership Number: _____

2. _____ Membership Number: _____

Additional Information & Special Instructions:

(Allergic Reactions, Blood Type, current Medications, etc.)

Signature: _____

Date: _____

FEATHER RIVER RAIL SOCIETY WESTERN PACIFIC RAILROAD MUSEUM

VOLUNTEERS RELEASE OF LIABILITY

READ CAREFULLY - THIS IS A RELEASE OF LIABILITY

This Release of Liability entered into on the date set forth below, by and between the Undersigned and the FEATHER RIVER RAIL SOCIETY, INC., an California non-profit corporation (the "FRRS"). Corporate offices are located at 700 Western Pacific Way, Portola, California. 96122. A copy of this release will be filed in the volunteer personnel records.

The FRRS operates a railroad museum; it is constructing, operating and renovating various railroad projects within the museum property. (the "Jobsite"). The undersigned desires to obtain entrance to, and be present at the Jobsite, operate and/or ride the FRRS, locomotive or other equipment. The Undersigned recognizes the risk inherent to boarding, riding, disembarking, operating equipment and otherwise being around or to ride the train, locomotive, and/or other equipment. The Undersigned agrees to (1) abide by all of the FRRS rules and regulations; (2) obey any and all written and oral commands given to the Undersigned by a volunteer, employee or representative of the FRRS, (3) wear a hard hat or other safety equipment as required at all times while present at the jobsite, and discharges the FRRS and its officers, directors, shareholders, volunteers, employees, agents, successors, and assigns, from any and all claims, demands, causes of action, or liabilities, whether known or unknown, fixed or contingent, that the Undersigned or Successors may have against any or all of them arising out of or related to the Undersigned's presence at location, acts, or omissions at the Jobsite or riding the FRRS train, locomotive, and/or equipment. This release allows entrance to the location(s) approved below:

I voluntarily accept the risks and dangers of participating in strenuous or hazardous activities. I realize not all of the risks and hazards are known but include, for example, movement of equipment, handling of heavy equipment and materials, unexpected movement of equipment, derailment, explosion, fire, escaping steam, use of old or defective tools and equipment, inexperienced co-workers and exposure to toxic materials including oils, fuels, asbestos and creosote."

This release will remain in effect for the calendar year of _____. This release may be canceled in writing at any time before expiration and delivered to the Superintendent of Operation, of the Feather River Rail Society.

Name: _____
(printed) (Signature)

Date: _____

Feather River Rail Society Representative Issuing Release of Liability

(FRRS Representative name printed)

(FRRS Representative Signature)

(Title)

(Date Issued)



OPERATING DEPARTMENT

	SECTION Procedure	SUBJECT Safety Orientation Checklist
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This orientation checklist has been prepared to assist Operating Department supervisors and team leads in either office environments or the physical work force. It assists in determining the safety and health expectations of new or returning crew volunteers/employees. This checklist is not all inclusive, nor is it intended to set out every one of our obligations or every work task. This checklist defines the basic starting point for individual's safety and health that will not be compromised. Creation of an injury and illness free work place environment requires a true commitment on each volunteer/employee.

Please check the appropriate box **Office worker** **Physical worker**

<i>Volunteer/Employee Information</i>	<i>Orientation Conducted by:</i>
Name (print):	Date:
Signature:	Department: Operating Department
Social Security Number	Supervisor / Team Lead (print):
Location:	Supervisor / Team Lead (signature):

EMERGENCY NOTIFICATION CONTACT INFORMATION

A Emergency Notification Sheet (Form 500) must be filled out and renewed annually for all volunteers/employees. The document shall be made readily available in the event of an emergency.

Safety 1st

Safety is of the first importance in the discharge of duty

Rule 108: In case of doubt or uncertainty, the safe course must be taken

Self Certification

I certify that I have reviewed and understand the information summarized in this document as evidenced by the completion of this Safety Orientation Checklist.

Signature

Date

EFFECTIVE DATE	REVISION NUMBER	REVISION DATE	PAGE
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OPERATING DEPARTMENT

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<i>Suggested topics to be covered as part of the Safety Orientation Checklist</i>	volunteer/ employee (Initials)	N/A ✓
<i>Recommend you utilize all Operating Department Safety material, and FRRS policies and standards.</i>		
Safety Program: Provide a copy of the Safety and IIPP. Understand the importance of regulatory compliance. "Injury and Illness Prevention Program".		
Code of Safe Practices: Provide a copy of the CSP to the employee. Review the Basic Safety Requirements and sections 1 and 2 and any other applicable sections.		
Roles and Responsibilities: Provide a copy of the roles and responsibilities as outlined on our XXXX Safety Web Site. It is an expectation of the employee to communicate any all concerns to his/her immediate supervisor / team lead.		
PPE: Identify Personal Protective Equipment Requirements for the scope of assignment: hard hat, safety glasses, hearing protection, coveralls, gloves, rain gear, fall protection.		
Projects: <ul style="list-style-type: none"> • Conduct pre-job walk down: safety review, scope review, id special tools, etc. • Conduct Job Assignment: Task sequence, resource review, and documentation. • Conduct Post Job Walk Down: Perform acceptance documentation and review safety issues corrected. 		
Injury Reporting Process: Understand how to report any injury/illness, near miss and/or motor vehicle accidents All injuries <u>shall be</u> promptly reported to the Supervisor so arrangements can be made for first aid or medical treatment.		
Driving: Understand site speed limit, seat belt use, and designated parking arrangements. In addition, any special hazards associated with the location (e.g. mountains, windy roads, traffic etc.)		
Misc.: Understand designated restroom facilities and restricted areas. Scaffolding, ladder safety, metal measuring tapes, pull boxes, spiders, bees, snakes, poison oak, Lyme Disease, SJ Valley fever, Hanta virus,		
Hazardous Materials and Waste: Understand Proposition 65 Employee Warning, Asbestos Notification Policy, and MSDS information is to be made available to you. Review chemicals that you may be exposed to while conducting your assignment. For an MSDS, contact 3E company at 800-451-8346. Understand the local Hazardous Material/Waste policies.		

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OPERATING DEPARTMENT

	SECTION Procedure	SUBJECT Safety Orientation Checklist
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Site Security: Review access to site during work hours and non-work hours and security issues.		
Conduct: No firearms, horseplay or running. Site Smoking Policy (smoke only in designated areas). Understand that no one shall knowingly be permitted to work while under the influence of drugs or intoxicating substances.		
Training Requirements: Review mandated training requirements from the Operating Department. It is an expectation that the volunteers/employee understand the need attend all required training.		
Potential Hazards of Work Area: Review potential occupational hazards of the general work area for a given job assignment including specific procedures to be followed, training requirements, personal protective equipment (PPE) available and where to find it:		
Excavations - understand underground service alert (USA)		
Fire Prevention (fire extinguisher training)		
First aid / CPR		
Heat Stress		

DISTRIBUTION: Original Superintendent of Operations, Copy to Volunteer/employee

Form 401

EFFECTIVE DATE	REVISION NUMBER	REVISION DATE	PAGE
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