

Membership Form
Northern Lights Snowmobile Club
Three Lakes, Wisconsin

Date: _____

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

Email: _____

Would you like to receive your newsletter via email? Yes ___ No ___

Do you have primary membership in another AWSC snowmobile Club? Yes ___ No ___

Primary Club Name: _____ AWSC Membership # _____

Amount | Description

_____ Family (\$30.00)

_____ Single (\$25.00 — Not married only)

_____ Business (\$30.00) Business Name: _____

_____ Trail Fund Donation

_____ **Total Enclosed**

By renewing my membership or becoming a member of Northern Lights Snowmobile Club, Inc., I agree to accept the by-laws of the club and operate my snowmobile in a safe and courteous manner.

Send membership form and check to:

Northern Lights Snowmobile Club

P. O. Box 344

Three Lakes, WI 54562