

# Snowmobile Club Membership Form 2019-2020

## Mohawk Trail Riders Inc./NHSA Club # 004

PO Box 167

Sanbornton, NH 03269

**ALL Memberships are \$35.00 (Single or Family)**

**PLEASE PRINT:**

Full Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

(Phone and Email is mandatory for Future online memberships)

**Family Member's Information**

Spouse Name: \_\_\_\_\_

**Children's Names** (Under the age of 18, before Sept 30<sup>th</sup>)

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Are you a new Member to Mohawk Trail Riders Club? Yes \_\_\_\_\_ No \_\_\_\_\_

Already a member of NHSA? Yes \_\_\_\_\_ No \_\_\_\_\_

**NHSA Marketing Purposes:** (Please tell us)

How many snowmobiles will you register this year? \_\_\_\_\_ If you live in NH, what county is it? \_\_\_\_\_

Membership Single or Family \_\_\_\_\_ **\$35.00** ( Club membership runs through June 2020)

Donation to Club (Maintenance) \_\_\_\_\_

Donation to Easter Seals \_\_\_\_\_

Total \$ \_\_\_\_\_ (Make checks payable to Mohawk Trail Riders Inc.)

**\*\$10.00 of your membership dues entitles you to NHSA Membership and a subscription to "Sno-Travelers" magazine.\***

**You will receive your NHSA membership cards and voucher by mail.**

**THANK YOU FOR YOUR SUPPORT! SEE YOU ON THE TRAILS!**

[www.mohawktrailriders.org](http://www.mohawktrailriders.org)

**Follow us on FB; Mohawk Trail Riders Snowmobile Club, Sanbornton and New Hampton, NH**