



Seney Snowmobile Association Membership Form

The Seney Snowmobile Association (SSA) is a nonprofit organization. Our grooming and trail maintenance is funded by not only your trail permit and fundraising, but also your SSA Membership Dues.

Membership Levels

One-Year Single Membership **\$25.00**

- Entitles you to purchase SSA merchandise at a discounted rate
- Entitles you to the SSA bi-monthly electronic newsletter
- Membership expires 1 year from signup date

Five-Year Single Membership **\$100.00**

- Entitles you to purchase SSA merchandise at a discounted rate
- Entitles you to the SSA bi-monthly electronic newsletter
- Membership expires 5 years from signup date

One-Year Commercial Sponsor Membership **\$50.00**

- Entitles you to purchase SSA merchandise at a discounted rate
- Entitles you to the SSA bi-monthly electronic newsletter
- Entitles you to a business card size ad in the newsletter
- Entitles you to a business card size ad on the SSA website
- Membership expires 1 year from signup date

One-Year Family Membership **\$35.00**

- Membership is for 2 people only
- Entitles you to purchase SSA merchandise at a discounted rate
- Entitles you to the SSA bi-monthly electronic newsletter
- Membership expires 1 year from signup date

Five-Year Family Membership **\$140.00**

- Membership is for 2 people only
- Entitles you to purchase SSA merchandise at a discounted rate
- Entitles you to the SSA bi-monthly electronic newsletter
- Membership expires 5 years from signup date



Seney Snowmobile Association Membership Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Payment Information:

- | | |
|-------------------------------|-----------------------------------|
| <input type="checkbox"/> Visa | <input type="checkbox"/> Discover |
| <input type="checkbox"/> MC | <input type="checkbox"/> Check |
| <input type="checkbox"/> AmEx | # _____ |

Make checks payable to: SSA

Membership Level

- One-Year Single - \$25
- Five-Year Single - \$100
- One-Year Commercial Sponsor - \$50
- One-Year Family - \$35

Name of family member:

- Five-Year Family - \$140

Name of family member:

Billing Information (if different from above):

Name: _____

Address: _____

City: _____ State: _____ Zip: _____