

Grafton Trail Blazers

Snowmobile Club

Season Membership application

Please check one: NEW APPLICATION _____ RENEWAL _____

Please check one: INDIVIDUAL \$30 _____ FAMILY \$30 _____

NYSSA ID: _____

FIRST NAME: _____

LAST NAME: _____

EMAIL: _____

*** Please print clearly ***

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE (_____) _____ - _____

NUMBER OF SLEDS YOU INTEND TO REGISTER THIS SEASON _____

SPOUSE OR PARTNER

FIRST NAME: _____ LAST NAME: _____

EMAIL: _____

CHILDREN UNDER 18 WHO INTEND TO REGISTER A SLED IN THEIR NAME:

1. _____

2. _____

3. _____

4. _____

_____ TRAIL DEFENDER (+\$20) add twenty dollars

_____ Twenty-five cents of \$5 NYSSA dues will be used for the NYS Snowmobile PAC (Political Action Committee) who is our voice in Albany. If you do not wish to contribute to the NYS Snowmobile PAC, please write N/A. Please note, NYSSA dues remain \$5.00.

_____ I wish to receive offers and promotions by mail directly from NYSSA sponsors.

TOTAL DUE \$ _____

Make payment and mail application to:

Grafton Trail Blazers

PO Box 221

Grafton, NY 12082