

Mukwonago Sno-Snoops

P.O. Box 172
Mukwonago, WI 53149
snosnoops@yahoo.com



Membership Application

____/____ Season Year
AWSC # _____

www.sno-snoops.com

Last Name: _____

Spouse's Name: _____

First Name: _____

Dependent Children are considered Members through Family Membership. Please list any Dependent children below:

Address: _____

City: _____

Child: _____ Age: _____

State: _____ Zip Code: _____

Child: _____ Age: _____

Primary Phone: _____

Child: _____ Age: _____

Work or Cell Phone: _____

Child: _____ Age: _____

Email Address: _____

Liability Insurance:

The Sno-Snoops Snowmobile Club, Inc. By-Laws state that a member **MUST** carry a current Insurance policy covering Liability on their Snowmobiles.

Please circle the number of Registered Snowmobiles: 1 2 3 4 5 6 7 8 9 10 10+

Membership Dues:

~\$35 per year September 1 to August 31. Paid Annually.

~Please make checks payable to the Sno-Snoops Snowmobile Club, Inc. Payment can then be sent via mail to the P.O. box listed above or presented at a Club Meeting to the residing board.

Membership Information:

Membership to the Sno-Snoops Snowmobile Club, Inc. will be accepted if a membership form for the current year is submitted with Liability Insurance compliance, along with a signed and completed membership form. Membership includes the use of Club trails and participation in all Club activities. Membership also includes the membership to the Waukesha County Snowmobile Association, and the Association of Wisconsin Snowmobile Clubs. In addition, as an AWSC member you will also receive a copy of the WI Snowmobile News Magazine.

Please Circle All Club Activities you would like to Participate In:

Trail Marking Trail Grooming Search & Rescue Fish Fry Club Rides Christmas Party
Summer Picnic Fundraising Hay Ride Local Publicity Highway CleanUp

I hereby agree to support & obey the Mukwonago Sno-Snoops, Inc. By-Laws as a Member:

Signature: _____ Date: _____