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|-----------------|-------------------------|
| Last Name: | --- OFFICE USE ONLY --- |
| | Membership # |
| Address: | Date returned: |
| | <> cash <> check # |
| City: | amount: |
| | Board review date: |
| State, Zip+4: | Computer entry date: |
| | ----- |
| Home telephone: | |

- - M E M B E R - - - - S P O U S E - -

| | | | |
|------------------|--|--|--|
| First Name | | | |
| Occupation | | | |
| Work shift | | | |
| Cellphone number | | | |
| Email Address | | | |
| | | | |

Number of
Snowmobiles

Names and Ages
of your children
under 18

A directory of members names and telephone
numbers will be distributed to the membership.
DO YOU WISH TO BE INCLUDED (Y/N) -->

The following information has been requested for use with
our emergency assistance in snow emergencies, etc...
-- do you own a CB radio (Y/N) -->
-- a 4-wheel drive vehicle (Y/N) -->
-- Should we call you for help (Y/N) -->

Membership fee is \$30/year, plus \$17 if you want an AWSC membership
also. An AWSC membership will get you discounts on your Trail Passes
as well as other benefits. Return the form to:

Gary Breuckman
4125 N 46th Street
Milwaukee, WI 53216-1524