

BRUHAWACHET SNO-TRACKERS, INC
P.O. BOX 441
RUMNEY, NH 03266

DATE: ____/____/____

PRIMARY MEMBER'S NAME: _____

PRIMARY MEMBER'S DATE OF BIRTH (***REQUIRED BY NHSA***): ____/____/____

SPOUSE/PARTNER: _____

MAILING ADDRESS:

STREET: _____

CITY/TOWN: _____

STATE: ____ ZIP ____ COUNTY OF RESIDENCE: _____

CONTACT INFO:

TELEPHONE: _____, E-MAIL: _____

DO YOU WISH TO RECEIVE THE SNO-TRAVELER VIA US MAIL: ____ YES ____ NO

ARE YOU *CURRENTLY* A MEMBER TO ANY OTHER NEW HAMPSHIRE SNOWMOBILE CLUB: ____ YES ____ NO

NUMBER OF SLEDS OWNED/REGISTERING (OPTIONAL): _____

CHECK IF FAMILY MEMBERSHIP: ____ OR SINGLE MEMBERSHIP: ____

CHILD UNDER 18 YRS: _____

CHILD UNDER 18 YRS: _____

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MEMBERSHIP DUES IS \$35.00 YEARLY & MUST ACCOMPANY APPLICATION.
THE INCREASE IS DUE TO CHANGES BY NHSA FOR THE NEW ON-LINE MEMBERSHIP SYSTEM EFFECTIVE 1/1/2016.

MAPS: \$5.00 EACH, AMT \$ _____

DONATIONS ARE ALWAYS WELCOME & VERY MUCH APPRECIATED, AMT \$ _____

We are a non-profit organization devoted to making winter more fun!

Should you have any questions/concerns please contact us at: bruhawachet-sno@comcast.net



PLEASE DO NOT WRITE IN THIS AREA

DATE REC'V: ____/____/____

DATE PROCESSED: ____/____/____

CASH AMT: \$ _____

CHECK AMT: \$ _____