

JO MARY RIDERS SNOWMOBILE CLUB

P.O. BOX 444

MILLINOCKET, ME 04462

MEMBERSHIP FORM

Please indicate your membership choice and return it with your payment to the address listed above.

If you prefer, you can join through our website. Donations are greatly appreciated!

NAME _____ ADDRESS _____

___1) JO MARY RIDERS ONLY (if already msa member)—ALL \$40 TO CLUB

DUES	\$40
TRAIL DONATION	\$ _____
RAFFLE TICKETS	\$ _____
ADOPT A TRAIL	\$ _____
TOTAL	\$ _____

___2) JO MARY RIDERS & MSA--\$25 TO JM, \$15 TO MSA

DUES	\$40	DATE OF BIRTH _____
TRAIL DONATION	\$ _____	# IN FAMILY _____
RAFFLE TICKETS	\$ _____	# OF SLEDS REGISTERED LAST YEAR _____
ADOPT A TRAIL	\$ _____	
TOTAL	\$ _____	

THANKS AGAIN FOR YOUR CONTINUING SUPPORT!