



Valley Crossing #11

Carrabassett Valley, ME 04947

## MEMBERSHIP APPLICATION

(Please print)

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Town/State \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_

Local Address \_\_\_\_\_

Town/State \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_

MSA Member?  Yes  No

If yes, through what club? \_\_\_\_\_

Occupation \_\_\_\_\_

Email \_\_\_\_\_

Snowmobiles Owned:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Would you take an active part in the club?

Yes  No