



Snowmobile North Dakota

Individual / Family Membership Form

Club Name: _____
 Contact Name: _____
 Contact Phone#: _____
 Date: _____

N/R	I/F	#	Last Name	First Name	Spouse	Mailing Address	City	State	Zip	Phone	Email
1											
2											
3											
4											
5											
6											
7											
8											
9											
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22											
23											
24											
25											
26											
27											
28											
29											
30											
Total Payment: # of Individual/Family Members () X \$20 =											

ALL COLUMNS MUST BE COMPLETED WITH THE EXCEPTION OF EMAIL.

FAMILY MEMBERSHIPS COUNT AS 1 AND PAY \$20 FOR THE SND MEMBERSHIP.

SECOND COLUMN: N stands for New Membership, R stands for a Renewal Membership.

THIRD COLUMN: I stands for Individual Membership, F stands for Family Membership.

FORTH COLUMN: this column only needs to be completed for Family Memberships. Please list the number of members in the family.

LAST COLUMN: All members providing email will receive E-newsletter correspondence.

*EACH INDIVIDUAL / FAMILY MEMBERSHIP COUNTS AS ONE MEMBER FOR VOTING PURPOSES: SND/SNDTP BYLAWS