

Membership Application



Checks Payable To : Suburban Sno-Hawks Send Remittance To : Suburban Sno-Hawks PO Box 511301 New Berlin, WI 53151-9998 <u>Please Circle One</u> Membership Renewal New Membership	Membership: \$30.00 + 8 Service Hours For Office Use: Date Received: _____ Check Cash Money Order # _____
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Last Name _____ First Name _____
Other Last Name _____ First _____ Phone # _____
Mailing Address _____
City _____ State _____ Zip _____
I would like to receive my newsletter by: <input type="checkbox"/> US Postal <input type="checkbox"/> E-mailed
Email Address _____
If accepted for membership, I agree to abide by the rules, regulations and by-laws of the Suburban Sno-Hawks Snowmobile Club and irrevocably release the Suburban Sno-Hawks Snowmobile Club and it's Officers from any liability for loss or damage sustained as a result of club activities; and agree to indemnify and hold harmless the Suburban Sno-Hawks Snowmobile Club and it's Officers from any claim against it by a third party for loss or damage to said party as a result of my participation in club activities. Signed _____ Date _____ Membership sponsored by _____

Childrens Name	Birth Date	Gender	Snowmobile Certified?	Y/N
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

WHAT ACTIVITIES WOULD YOU LIKE TO SEE THE CLUB DO FOR THE UPCOMING SEASON ??? PLEASE GIVE US YOUR IDEAS !
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