



VIKING SNOWDRIFTERS MEMBERSHIP FORM

www.vikingsnowdrifters.com

- New Membership
- Membership Renewal

Name: _____ Spouse/Partner: _____

Children: Name _____ Age _____ Safety Certified _____
 Name _____ Age _____ Safety Certified _____
 Name _____ Age _____ Safety Certified _____
 Name _____ Age _____ Safety Certified _____

Address: _____

City, State, Zip _____

Phone: _____ Cell: _____

Email: _____

How did you hear about us? _____

By joining, you will become a member of AWSC (Association of Wisconsin Snowmobile Clubs) and receive an AWSC membership card and a monthly magazine from AWSC.

Dues: \$25.00 Single or Family **Payable to:** Viking Snowdrifters

Send completed form and fee to: Jeremiah Bennett 1833 Oakview Dr Stoughton, WI 53589

Meetings are held the third Tuesday of the month at 7:00pm from September through April. Call Jeremiah 608-576-1079 for location.

Please note any areas of interest that you would like to be involved in as a club member

- | | |
|--|-------------------------------|
| _____ Trail Installation / Removal & Maintenance | _____ Trail Groomer Operation |
| _____ Club Rides, Tours, Outing | _____ Fundraising Events |
| _____ Officer / Board Member | _____ Holiday Party |
| _____ Other Idea: _____ | |

Thank you for joining!