



FIFIELD
SNO DROVERS
SNOWMOBILE CLUB
SNODROVERS.COM • FACEBOOK.COM/SNODROVERS

MEMBERSHIP FORM

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____

HOME PHONE: _____ CELL PHONE: _____

ADDITIONAL MEMBERS: (Spouse and/or dependent children under 18 years old)

IF AFFILIATED, NAME OF PRIMARY CLUB AND AWSC #:

MEMBERSHIP LEVEL: (Select one)	<input type="checkbox"/> \$25 - INDIVIDUAL/FAMILY	MEMBERSHIP TYPE: (Select One)	<input type="checkbox"/> NEW
	<input type="checkbox"/> \$35 - BUSINESS		<input type="checkbox"/> RENEWAL
	<input type="checkbox"/> \$100 - PLATINUM BUSINESS		

PAY ONLINE: [HTTPS://SNODROVERS.COM/MEMBERSHIP](https://snodrovers.com/membership)

- OR -

MAIL THIS APPLICATION (WITH PAYMENT) TO:

FIFIELD SNO DROVERS
N15893 SHADY KNOLL RD.
PARK FALLS, WI 54552

MAKE CHECKS PAYABLE TO: FIFIELD SNO DROVERS SNOWMOBILE CLUB