

LOST TRAIL SNOWMOBILE CLUB, INC.

P. O. Box 604

Boonville, New York 13309-0604

First Name {PRINT ONLY} _____

Last Name _____

Street Address/PO Box _____

City/ State _____ Zip Code _____

Family Membership Information

Spouse: First Name _____ Last Name _____

Children under 18 that intend to register a sled

Phone # _____

Email _____ {DMV Voucher, NYSSA News Letter and other information can be emailed}

Individual \$25.* Family (of 4) \$25* Landowner \$00.

*\$5 goes to NYSSA membership

NYSSA Trail Defender membership upgrade additional \$20.00

Have you already paid NYSSA Dues this season via another club? _____

If so, which Club _____

[] Twenty five cents of your \$5 NYSSA dues will be used for the NYS Snowmobile PAC (Political Action Committee) who is our voice in Albany. If you do not wish to contribute to the NYS Snowmobile PAC, please check this box. Please note, your NYSSA dues remain \$5.00.

Questions: Call Membership Secretary 315.942.4464

For Club use only

Blank Voucher ID issues (ex 07-140-B183): _____

Snowmobile Trail Land Owner

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P. O. BOX 604
BOONVILLE, NEW YORK 13309