

Calumet Sno-Trails, Inc.

MEMBER INFORMATION

First & Last Name:		
Address:		
City:	State:	Zip:
Email address:		
Best phone number to contact you:		

*please note - we communicate via email, Facebook and our web page. We occasionally contact members by phone.

Spouse/Significant Other Information, if applicable

First & Last Name:
Secondary Email:
Secondary phone number:

*please note - we communicate via email, Facebook and our web page. We occasionally contact members by phone.

Annual Membership Cost: \$30.00 _____

Is your membership a RENEWAL? _____ NEW? _____

If you currently belong to another snowmobile club that has paid your AWSC dues, you may deduct \$17.00 from your membership payment. Please provide the name of the club _____ and your AWSC member number (if known) _____ for verification.

Please make a check payable to: CALUMET SNO-TRAILS and mail to 612 Graves Street, Chilton, WI 53014

Our club membership year is from July 1 to June 30

Dues include \$17.00 that we send to the AWSC (Association of Wisconsin Snowmobile Club) to renew your yearly membership with the AWSC. This entitles you to their magazine - Wisconsin Snowmobile News. The AWSC is our lobbying voice with both state and national issues pertaining to snowmobiling. With a current club/AWSC membership you also have access to the **discounted snowmobile trail pass**. Ordering information and more information can be found at awsc.org. Please note that you will NOT be receiving the yellow card any longer. We decided that it is an expense that our club does not need and your membership number can be found on the mailing label of the magazine.

Volunteer: Our club is busy most months of the year. There's trail prep work, trail brushing, trail marking, getting easements, fund raising and building & equipment maintenance needs that need to be done. Volunteering for these things is a great way to meet fellow club members who have the same interest as you - snowmobiling 😊 Would you like to help with any of the following?

Building & Grounds Maintenance		Brush/ Mark Trails		Groomer Operator		Other

United We Trail, Divided We Fail

Office Use Only: Amount Paid \$ _____ Cash _____ Check number _____ Date Paid _____