



MEMBERSHIP / RENEWAL FORM

This is a: ____ Renewal Membership ____ New Membership

Enter your AWSC ID Number (if known): _____

First Name: _____ **Last Name:** _____

Spouse Name: _____

Home Phone: _____ **Mobile Phone:** _____

Email Address: _____

Address: (street, city, state, zip code)

Membership Fee: \$46.50 Family/Individual

Additional Donation Amount: \$ _____

Total Amount Enclosed: \$ _____

Make Check Payable to: Snobunnies Snowmobile Club

Mail this form & payment to:

Carleen Wendorski

13387 Serenity Lane

Winchester, WI 54557