



**Club Mailing Address:** 117 - 53305 Rge Rd 280, Spruce Grove T7X 3V7

**Contact:** Barb or Hermann Gratzfeld @ 780-963-5907

**Club Membership & Trail Pass Information 2009-2010**

**Date Purchased:** Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**Paid By:** cash \_\_\_\_\_ cheque # \_\_\_\_\_ visa or m/c \_\_\_\_\_ Total Paid \$ \_\_\_\_\_

**Trail Seekers Club Membership:** Yes  No  **\$20.00**

Pass Holder's First & Last Name	Age	M/F	Trail Pass Purchased		Trail Pass Number
			Before Jan. 1	After Jan. 1	
			\$60.00 <input type="checkbox"/>	\$70.00 <input type="checkbox"/>	

Spouse's First & Last Name	Age	M/F	Trail Pass Purchased		Trail Pass Number
			Before Jan. 1	After Jan. 1	
			\$60.00 <input type="checkbox"/>	\$70.00 <input type="checkbox"/>	

Children's First & Last Name	Age	M/F	Trail Pass Purchased		Trail Pass Number
			Before Jan. 1	After Jan. 1	
			\$60.00 <input type="checkbox"/>	\$70.00 <input type="checkbox"/>	
			\$60.00 <input type="checkbox"/>	\$70.00 <input type="checkbox"/>	
			\$60.00 <input type="checkbox"/>	\$70.00 <input type="checkbox"/>	
			\$60.00 <input type="checkbox"/>	\$70.00 <input type="checkbox"/>	
			\$60.00 <input type="checkbox"/>	\$70.00 <input type="checkbox"/>	
			\$60.00 <input type="checkbox"/>	\$70.00 <input type="checkbox"/>	

<b>Mailing Address:</b>	<b>City / Town:</b>	<b>Postal Code:</b>

<b>Home Phone Number:</b>	<b>Work Phone Number:</b>	<b>Fax Number:</b>

**Email Address:**

**Snowmobiles Owned (Include Year, Make & Model):**


Would you like a copy of SnoRiders West Magazine Yes  No  Number (1/trail pass) \_\_\_\_\_

Can we put your name & phone no. on a membership list to be distributed to members? Yes  No

**Signature**