Established 1988
P. O. Box 104
Cazenovia, NY 13035
315-750-8640



SVRMembership@gmail.com

SNOWMOBILE CLUB MEMBERSHIP FORM 2023-2024

NYSSA Number:

(ONLY THE NAME OF THE PERSON THE SNOWMOBILES WILL BE REGISTERED TO)

me:	
dress:	
dress:	
y, State, Zip:	
lephone: Cell #:	
To Receive a Monthly Newsletter, NYSSA Information, Club Event Information, Please Provide Your Email Address Below (please print clearly)	
ail:	
TYPE OF MEMBERSHIP	
lividual Membership (\$30.00) Family Membership (\$35.00) Additional family members are limited to one spouse or partner and children under age 18.	_
ditional Adult/Spouse's Name:	
mber of snowmobiles you intend to register this season:	
mber of children (under 18) who ride:	
you want to become a Trail Defender? If so, please add \$20 and check here: Yes	
renty five cents of your dues will be used for the NYS Snowmobile PAC (Political Action Committee ice in Albany. If you do <u>not</u> wish to contribute to the NYS Snowmobile PAC, please check here:	•
e you interested in volunteering to help maintain the trails? Yes	
you own land on which one of our trails presently crosses? Yes	
mments or Concerns	
(Use other side or additional sheets if necessary)	
TO HELP ENSURE TRAIL FUNDING PLEASE RETURN THIS FORM AND PAYMENT BY NOVEMBER 15, 2	
s a member of Snow Valley Riders, I (we) agree to respect property owner's land & stay on designated Clubide by all NYS Laws, Rules, & Regulations by the NYS Dept. of Conservation (DEC), NYS Forestry Dept. & End of Snow Valley Riders, Inc.	
igned Date	