



# St Lawrence County Snowmobile Association, Inc. (SLCSA)

PO Box 421  
Canton, NY 13617

Web Site: [WWW.slcsa.org](http://WWW.slcsa.org)



## Membership Application for 2019-2020 Season

SLCSA meets 2<sup>nd</sup> Tuesday of each month, 7:00 p.m. at  
St Patrick's Parish on Rt 56 in Colton.  
The Membership year runs from Sept 1<sup>st</sup> to Aug 31<sup>st</sup>

**NOTE:** Name and address information must match your  
Snowmobile Registration.

<b>Official Use Only</b>
Date Received _____
Total Amt. Paid _____
Circle: Cash or Check
Voucher # 07-0975-_____

<input type="checkbox"/> <b>Check ONE of the Membership Options below:</b>
( ) New ( ) Renewal

**PLEASE PRINT CAREFULLY!!! IF ADDRESS IS CORRECT ON ENVELOPE PRINT "SAME" IN ADDRESS**

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

Children: \_\_\_\_\_  
(Children - If under 18 and are registering a Snowmobile)

Address: \_\_\_\_\_ # of Registered Sleds: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Occupation: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Newsletter Delivery method: ( ) E-Mail ( ) USPS Mail ( ) Do not send me one.

**Check ONE of the options below:** (One Membership fee includes all names listed above.)

**\$30 Membership - Individual or Family** Includes a SLCSA membership card and decal, \$5 NYSSA (NY State Snowmobile Association) Membership, Membership Card, Snowmobile Registration Discount Voucher (\$55 value per sled registered) and a one year subscription to the New York Snowmobiler Magazine.

**\$50 Membership - Business Sponsor** added to our website and a link to yours.

Type of Business and/or Services you have: \_\_\_\_\_

(\$\_\_\_\_) Write in any additional donation to SLCSA.

We need volunteers to help maintain our trail system. Trails are not maintained with money alone. Please put a check mark next to the type of volunteer work you would be willing to help with.

<input type="checkbox"/> Trail Grooming	<input type="checkbox"/> Trail Maintenance	<input type="checkbox"/> Groomer Maintenance
<input type="checkbox"/> Fund Raising	<input type="checkbox"/> Trail Mapping / GPS	<input type="checkbox"/> Web Page (Maintain / Design)
<input type="checkbox"/> Club Officer or Board Member	<input type="checkbox"/> Club Events	<input type="checkbox"/> Land Owner Liaison
<input type="checkbox"/> Other, Explain: _____		

\*\*\* Make Checks payable to: **St Lawrence County Snowmobile Association, Inc.**  
\*\*\* Mail application and fee to the address shown at the top of this form or bring to a club meeting

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(A parent or guardian's signature is required below, if under 18)

Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_