



Membership Application

Check one: New Membership Renewal Season: _____

Name (Print): _____ Spouse's Name: _____

List Children (Under 18) (if Family Membership): _____

Business Name (if Business Membership): _____

Street Address: _____

City: _____ State: _____ Zip code: _____

Phone Nos.: _____ Emails: _____

I would like to receive emails from the PA State Snowmobile Association (PSSA): YES: _____ NO: _____

Check one:		
<input type="checkbox"/> Single Membership - \$15	<input type="checkbox"/> Family Membership - \$20	<input type="checkbox"/> Business Membership - \$40
Membership Dues from Above		\$
Additional Donation Amount		\$
Total Enclosed		\$

Family Membership includes spouse + children under 18. Business Members listed on the Club website.

Make check payable to ***"Glendale Lake Snowmobile Club"***. Send application and check to:

Glendale Lake Snowmobile, PO Box 174, Patton, PA 16668

Signature*

Date

***BY SIGNING THIS APPLICATION, YOU & ALL LISTED AGREE TO ABIDE BY GLENDALE LAKE SNOWMOBILE CLUB BY-LAWS.**