



Great Falls Snowmobile Club

Membership Application

Name: _____ Date: _____

Spouse/Partner: _____ Minor Children (Under 18) : _____

Phone: _____ Spouse/Partner Phone: _____

Address: _____ City: _____ State: _____ ZIP: _____

E-Mail: _____

Your email is very important to us, please include it and print clearly

PLEASE PICK ONE

Single Membership: \$20 _____

Family Membership: \$25 _____

Corporate Sponsorship: Bronze \$50 _____ Silver \$100 _____ Gold \$200 _____

Total Enclosed: _____ Check # _____

Preferred method of contact: E-mail: _____ Phone: _____ Text: _____

Please Mail to: Great Falls Snowmobile Club
P.O. Box 70
Black Eagle MT, 59414