

Rough Rider Snowmobile Association
MEMBERSHIP APPLICATION

Name(s): _____

Address: _____ City/Zip: _____

Phone: _____ E-mail: _____

Date: _____ Signature: _____

Number of riders in family: _____ Number of snowmobiles: _____

Membership type: _____ Single/Family or _____ Associate (check one)

Yearly Membership Dues: \$30 (Single/Family), \$75 (Associate). This also includes membership to Snowmobile North Dakota (SND), which includes a subscription to the Sno-Dak News (the official newspaper of SND) and \$2,000 in accidental death insurance. Please make checks payable (and return this form) to:

Rough Rider Snowmobile Association
PO Box 4162 - Bismarck, ND 58502-4162

Be sure to check out our website for meeting dates and event information!

www.roughridersnow.com

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