



NHSA Club # 421

Bridgewater Mountain Snowmobile Club
PO Box 675
Ashland, NH 03217

www.bridgewatermtnsmc.org

2007-2008 Membership Application

Name: _____

Family Membership Info:

Spouse's Name: _____ Total Number of Family Members: _____

Mailing Address: _____

E-Mail Address: _____

Phone #: (____) _____

Dues: Individual Membership = \$20.00 Family Membership = \$25.00

1. Please feel free to include a donation to our trails/grooming fund: \$_____

2. Are you an NHSA member through another club? Yes / No

3. Do you wish to receive the Sno-Traveler Magazine from NHSA? Yes / No

Make all checks payable to: Bridgewater Mountain Snowmobile Club.

Look for updates and newsletters on our web-site or contact us at bmsc@metrocast.net

For Secretary's Use

Date Received: _____ NHSA Member #: _____ Check # or Cash _____

Date Sent to NHSA _____