



**Spokane Winter Knights  
Snowmobile Club**

**SpokaneWinterKnights.com  
spokanewinterknights@gmail.com**

## **New Membership Form**

**\$30.00 Annual Membership Fee covers your entire family in your household. It also includes membership in WSSA.  Check here to opt out of WSSA Free email newsletters included, extra \$5.00 fee for USPS mailed newsletters.**

**Return this form and payment to:**

**Al and Nellie McCarty  
P.O. Box 1255  
Mead, WA 99021-1255**

**For any questions, please call: 509-279-5741**

**Last Name:** \_\_\_\_\_

**First Name of Primary Member(s):** \_\_\_\_\_

**First Name(s) of each additional family member:**  
\_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Primary Phone Number:** \_\_\_\_\_

**Secondary Phone Number:** \_\_\_\_\_

**Email Address (club's primary source of communication):** \_\_\_\_\_

**Secondary Email Address:** \_\_\_\_\_

**How many SNOWMOBILES at your household?** \_\_\_\_\_

**How many RIDERS in your household?** \_\_\_\_\_

**Occupation and /or Special Skills of primary members:** \_\_\_\_\_

**Interested in joining Search & Rescue? Yes No Maybe (circle one)**

**Do you want to receive mailed newsletters via USPS? (Additional \$5 fee) No Yes (circle one)**

**By submitting payment, you agree to adhere to the By-Laws of the Spokane Winter Knights Snowmobile Club. A copy of these By-Laws are available upon request.**

**Birth date of EACH member : Name \_\_\_\_\_ Birth date \_\_\_\_\_**

**(MM/DD/YYYY)**

**Name \_\_\_\_\_ Birth date \_\_\_\_\_**

**Name \_\_\_\_\_ Birth date \_\_\_\_\_**

**Name \_\_\_\_\_ Birth date \_\_\_\_\_**

**Name \_\_\_\_\_ Birth date \_\_\_\_\_**

**Used to determine  
Golden Member status.**