



**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.

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: _____ **cell phone or landline (circle one)**

Secondary Phone Number: _____ **cell phone or landline (circle one)**

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)

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.**