



Burnt Meadow Snowmobile Club

P.O. Box 412, Brownfield, ME. 04010

Application for Membership

Individual and Family: \$30.00

Business Membership: \$46.00

Name: _____

Mailing address: _____

Town: _____ State: _____ Zip: _____

Phone: _____

***Email for sending out newsletters:** _____

Date of birth: _____ # of Family members joining: _____

Beneficiary: _____ Date of birth: _____

What do you ride: _____

*Future newsletters will be emailed in order to keep down our mailing costs, your cooperation is appreciated.

\$3500 accidental death and dismemberment coverage is included for dependents at no charge provided their information is listed below. Eligible Dependents are named member's spouses and any unmarried dependent child: biological, step, foster or adopted. Please attach another sheet if needed.

Dependent's Name _____ Date of Birth _____

Relationship to Member (circle one) Spouse Child

Beneficiary _____

Dependent's Name _____ Date of Birth _____

Relationship to Member (circle one) Spouse Child

Beneficiary _____

Dependent's Name _____ Date of Birth _____

Relationship to Member (circle one) Spouse Child

Beneficiary _____

Dependent's Name _____ Date of Birth _____

Relationship to Member (circle one) Spouse Child

Beneficiary _____