

LYMAN



SNOWMOBILE CLUB

Meeting every 1st Thursday of the month
at the Lyman Community Library

Lyman Snowmobile Club Membership Application

NAME: _____ DATE: _____

ADDRESS: _____ ZIP: _____

CITY/TOWN: _____ STATE: _____

TEL: _____ D.O.B: _____ # OF FAMILY MEMBERS: _____

EMAIL ADDRESS: _____

BENEFICIARY FOR MSA INSURANCE: _____

ADDITIONAL DEPENDENT INSURANCE FOR:

NAME: _____ D.O.B: _____

RELATIONSHIP: _____ BENEFICIARY: _____

Additional Dependent Insurance is available for a member's children or spouse at a cost of \$2 per dependent.

FOR MORE INFORMATION CALL 499-2130

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CLUB DUES: **\$30 Family**
\$40 Business

Enclose Membership Dues and Return to:

Lyman Snowmobile Club
P.O. Box 125
Alfred, Maine 04002