

# Flathead Snowmobile Association

## 2008-2009 Membership Application



F.S.A. begins a new membership year every June

*This form can be filled out using your PC*

Name:

Company Name:

Address:

City:

State/Province:

Zip/Postal Code:

Home Phone:

Cell Phone:

Email:

Date:

☐ I am New ☐ I am Renewing

Make checks payable to:

Flathead Snowmobile Association  
PO Box 5041  
Kalispell, MT 59903-5041  
USA

Phone: 406-892-0513  
[www.flatheadsnowmobiler.com](http://www.flatheadsnowmobiler.com)

I (We) would like to help with the following functions:

- |   |               |
|---|---------------|
| <input type="checkbox"/> Pray for snow party                | November 2008 |
| <input type="checkbox"/> Night of Lights (Columbia Falls)   | December 2008 |
| <input type="checkbox"/> January Family Day Ride            | January 2009  |
| <input type="checkbox"/> Whitefish Winter Carnival          | February 2009 |
| <input type="checkbox"/> February Family Day Ride           | February 2009 |
| <input type="checkbox"/> March Family Day Ride/Doug Betters | March 2009    |

Amount enclosed:

Flathead Snowmobile Association Only

### Membership Rates

Flathead Snowmobile Association & Montana Snowmobile Association

- ☐ **Single \$10**
- ☐ **Family \$15**
- ☐ **Business \$25**

- ☐ **Single \$32**
- ☐ **Family \$45**
- ☐ **Business \$60**

How many snowmobilers in your family or business?

*FSA will forward your application and dues to Montana Snowmobile Association*

Visa/MC Only  Expiration

Name on Card  Signature

You can also use your credit card on our web site <http://www.flatheadsnowmobiler.com/join.cfm>

Member T.E.A.M. - Together Everyone Achieves More!

Thank you for your support!