

'RIVER CITY SNOW RIDERS'
Application for Membership

Name _____
(last) (first)

Address _____
(street)

(city) (state) (zip)

Phone _____ # of Snowmobiles _____

Membership: _____ Single
_____ Family names

Dues: \$30 per household _____
(includes \$20 for MNUSA membership) _____

I/We agree to abide by the "bylaws" of the "River City Snow Riders" snowmobile club.

Signed: _____ date: _____

_____ dues received

Send to: River City Snow Riders
P. O. Box 553
Elk River, MN 55330
Attn: secretary

Or:

Bring to our next general meeting: third Wednesday of every month at 7:30 p.m.,
at Broadway Bar and Pizza.