

Tri-County Drift Hoppers Inc.
Snowmobile Club
P.O. Box 94
Arcade, NY 14009
Contact: info@drifthoppers.net



Please print: **NOTE: must match snowmobile registration!**

First name: _____ Last name: _____

Address: _____ (ex. 6 Maple St. or PO Box 123)

City: _____ State: _____ Zip: _____

Email: _____ Phone Number: _____
(Required to receive NYSSA newsletter and other information)

Please check if you are a Snowmobile Land Owner ()

Family Membership Information:

Spouse: First name: _____ Last name: _____

Children under 18 that intend to register a sled:

Name: _____

Name: _____

Your membership types and prices are: Individual \$ 40.00 Family \$ 40.00

() NYSSA Trail Defender membership upgrade, additional \$20.00

Have you already paid NYSSA dues this season via another club? Yes / No

If yes, which club? _____

Please enter the number of snowmobiles you intend to register: _____

() Twenty five cents of your \$ 5.00 NYSSA dues will be used for the NYS Snowmobile PAC (Political Action Committee) who is our voice in Albany. If you DO NOT wish to contribute to the NYS Snowmobile PAC, please check this box. Please note, your NYSSA dues remain \$5.00.

Total amount due: _____ Paid with/cash/check: _____

Signature: _____ Date: _____