

Mexico Trail Riders, Inc. Membership Application YEAR:

Membership Year is September 1st through August 31st. Any application received on or after April 1st will be credited to the following year. NYS Charities Registration 20-50-85

The Mexico Trail Riders membership is \$30.00 per year; with \$24 going to the club and \$5 to the NYSSA for their basic membership plus \$1 to SLEDNY. This is for an individual or family; this includes you, your spouse (married or not) and all children under 18. You may also select to upgrade the NYSSA membership to the Trail Defender level, by selecting this you are doing this in lieu of the basic NYSSA membership, the additional cost is \$20. If you have already joined NYSSA through another club you can claim exempt. MTR memberships includes: state registration voucher, and decal.

For the DMV voucher we need the EXACT names and address as it appears on ALL registrations. We have provided spaces for six names, Member, Spouse (married or not) and up to four children, if there are any additional names required please include them on a separate piece of paper or on the back. Addresses must all be the same, which is what defines a family in the eyes of the voucher. We have provided for a separate mailing and voucher address if needed, if not leave voucher address blank. We only need last names if different from member.

	heck One: New () Renew			Suffix (Jr. Sr.)
Member				
1st Child				
4th Child				
Mailing Address		City	State	Zip
Email:				
Number of Sleds: Phone: () - Check to be Exempt From N Membership Options Section – Please Select One (Please Cite)				
Landowner/Military T-shirts (Circle Size and	•	ge, X-large) (2X-3X \$18.00		\$30.00 \$30.00 \$50.00 Free \$15.00 ay) \$18.00

By completing this membership for application, I agree to abide by the By-Laws of this Club. The club membership secretary will mail membership vouchers after each year's renewal payment is received. Make Checks Payable to: Mexico Trail Riders, Inc. - PO Box 564 - Mexico, New York 13114-0564

Member's Signature	 Date	

To be filled out by membership committee: Received \$ _____ | Cash | Check #_____ Logged By _____ | Map | ID | Voucher#__

Official Membership Application DN 001.doc Rev September 3, 2020