



Blue Mountain Snowdusters, O.R.C.

PO Box 428

Grantham, NH 03753

www.snowdusters.org

Application for Membership

July 1, 2022– June 30, 2023

Primary Member _____ Date of Birth* _____

Primary Member's Email** _____

Second Member _____ Date of Birth* _____

Second Member's Email** _____

*Date of birth and primary member email address are now required by NHSA.

**This is the primary method of communication by BMSD. Your email address will not be shared.

Mailing Address _____

City/Town _____ State ____ Zip Code _____

Phone () _____

Please Fill In All That Apply. Checks Payable to BMSD.

***BMSD is a 501(c)3 charitable organization.

All donations are tax deductible to the extent allowed by law.

Do You Wish To Receive The **SnoTraveler**? _____ (available if dues are paid by Nov 1st)

Single Membership ___\$20 Family Membership ___\$30 Map ___\$5

Tax Deductible Donations*** ___\$5 ___\$10 ___\$20 ___\$50 ___Other \$_____

Members Interest (circle all that apply) Snowmobiling XC Skiing Snowshoeing

Hiking Mountain Biking Road Biking Horseback Riding Rail-Trail Biking

We Are An All Volunteer Club.

All Members Are Responsible For Trail and/or Club Work. Thank you!