



WILLOW CREEK SNOWMOBILE CLUB 2025-2026

MEMBERSHIP FORM

willowcreeksnowmobileclub@gmail.com
<https://willowcreeksnomobi.wixsite.com/wcsc>
fb.me/WillowCreekSnowmobileClub

\$35.00 individual membership donation
\$50.00 family membership donation

Primary Member's Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone Number: (_____) _____ - _____ **Date of Birth:** _____

Email Address (required): _____

Family Information (please include spouse name and any children under 18 that intend to register a sled):

_____	_____
_____	_____

Estimated Number of Sleds Registered: _____

By signing below, I agree to the following:

I will be responsible for myself, and my family, and knowingly assume ALL risks and liabilities. In the event of fire, theft or accident, to myself, my family, snowmobiles, or other equipment, I will not hold the Willow Creek Snowmobile Club responsible. In the event of damage or injury, I will not make a claim against the Willow Creek Snowmobile Club, its officers, or members. I submit this application upon promise to comply with ALL rules and regulations of the Willow Creek Snowmobile Club.

All club snowmobiles must be registered with that Commonwealth of Pennsylvania and Carry Proof of liability insurance!!! This application covers membership through August 31, 2025

Member Signature _____

Date _____

Amount Enclosed: (Note--family members 18 years and older must have an individual membership)

_____ \$35.00 for annual membership _____ \$50.00 for annual family membership