



membership form

Please print all information and return with your payment to:

Mount Snow Ski Club
P.O. Box 46, West Dover, VT 05356

Member to whom correspondence should be sent:

Last Name: _____ First Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Local Phone: _____

Cell Phone: _____ Email: _____

MEMBERSHIP

	FEE:	QUANTITY:	TOTAL:
Family Membership	\$300	_____	_____
Family Membership WITH COMPETITOR(S)	\$400*	_____	_____
Competition Membership <i>(junior competitors whose parents are NOT MSSC members)</i>	\$150*	_____	_____
Adult Membership	\$150	_____	_____
Associate Membership <i>(non-competitor children of current adult members of MSSC who are between the ages of 25-35)</i>	\$75	_____	_____

*Family Memberships with competitors and Competition Memberships include a **\$100 volunteer bond** which will be returned to you upon fulfilling your volunteer obligation (at least one event per season).

LOCKERS

Current Locker Number: _____

Regular Locker \$250 _____

Large Locker \$350 _____

* Please put my name on the locker waiting list

Small Locker

Large Locker

ENCLOSED TOTAL: _____

All memberships with lockers **MUST BE PAID IN FULL** by **October 1st** to assure locker renewal.

FAMILY MEMBERSHIP INFORMATION:

Parent/Guardian/Adult Names: _____

Dependent's Name & Birth Date: _____
