



Paid Date _____ Check # _____ Cash _____ PayPal _____
Paid \$ _____

Meetings: September through March – 3rd Tuesday of the Month
6:30 p.m. Board Meeting
7:30 p.m. General Meeting
Rustic Inn
W360 N8739 Brown Street
Oconomowoc, WI 53066

North Lake Nomads, Ltd. Membership Application

Date: _____

Primary Member Name: _____

Married Spouse: _____

Street Address: _____

City: _____ State: _____ Zip: _____

E-Mail Addresses: Primary Member: _____

Additional Family Members e-mail address: _____

Cell Phone Primary Member: _____

Number of Registered Sleds: _____

Membership Dues: \$30.00 thru mail or received at meeting

\$35.00 thru PayPal

(Please make checks payable to: **North Lake Nomads, Ltd. PO Box 45 North Lake WI 53064**)

WARRANTY: Member warrants that he/she shall be liable for all property damage or bodily injury resulting from operation of a snowmobile while on or off the North Lake Nomads, Ltd. Trails or Waukesha County Snowmobile Association trails. A minimum of \$20,000 liability insurance per snowmobile is a requirement of membership.

DUES: Dues shall be accepted by the Treasurer only upon presentation of this application, properly completed and signed by the applicants. Dues must be paid in full.

RENEWAL PERIOD: July 1st to June 30th

MEMBERSHIP INCLUDES: Wisconsin Snowmobile News Magazine.

Signature of Primary Member: _____

North Lake Nomads, Ltd., PO Box 45, North Lake, WI 53064
www.northlakenomads.com