



MEMBERSHIP APPLICATION

Please complete and return with annual dues – Attn: Amber Wood

Registration

Representative: _____ Company: _____

Operating Area (if applicable):

Contact Information:

Phone: _____ Cell: _____

Fax: _____ Email: _____

Address: _____

Web Site: _____

Membership Type / Annual Dues

Member with 15 or less machines - \$500

Member with 16 or more machines - \$1000

Probationary Member - \$250 – to be reviewed annually

Associate Member – Partnership / Corporate – Minimum of \$250

Guide Member – if working for a member operations – \$25

Guide Member – if not working for a member operation - \$100

Please make cheque payable to British Columbia Snowmobile Operators Association or (BCCSOA).

I agree to operate under the approved code of ethics, membership responsibilities and guidelines set out by the BCCSOA; Signed _____ on _____, 2007

Office Use Only:

Paid _____ Date: _____

Notes: _____