

# 2025-2026 Membership Transmittal Form

Available as an interactive, printable pdf on the MSA web site, [www.mainesnowmobileassociation.com](http://www.mainesnowmobileassociation.com)

A transmittal form must accompany the membership cards and payments sent to the office. This form can also be used to order additional membership materials. On the reverse of this form, enter the submitted members' names, addresses and card numbers. Phone numbers are optional. Add up the memberships and enter the number below. Family Membership dues are \$15. Business memberships are \$23.

**NOTE: Super Raffle payments:** A transmittal form is not required for Super Raffle payments, but a space is provided to note your club's Super Raffle payment. **To comply with state raffle rules we will require a separate check for club raffle payments.** If an over or underpayment is made, the amount will be billed or credited to the club. If you have received a credit from the office, enclose the credit memo and subtract the credited amount from your sub-total. If you have received notice of an underpayment, add the underpaid amount to your sub-total.

Photocopy the completed transmittal for your records if you wish, then mail the transmittal form, membership cards and payment to MSA, PO Box 80, Augusta ME 04332.

Date of Transmittal: \_\_\_\_\_

DESCRIPTION	NUMBER	AMOUNT	TOTALS
FAMILY MEMBERSHIPS		X \$15 =	
BUSINESS MEMBERSHIPS		X \$23 =	
		<b>Sub-total:</b>	
		<b>Subtract any issued credit or add any underpayment</b>	
		<b>MEMBERSHIP TOTAL:</b>	\$ _____

**NOTE: CLUB SUPER RAFFLE PAYMENTS MUST BE SUBMITTED IN A SEPARATE CHECK**

DESCRIPTION	NUMBER	AMOUNT	TOTALS
SUPER RAFFLE TICKET SALES <small>(Submit MSA portion of money only, remainder stays with the club)</small>		SUPER RAFFLE TOTAL:	\$ _____

MATERIALS REQUEST	NUMBER:
Transmittal forms <small>or print copies at <a href="http://www.mainesnowmobileassociation.com">www.mainesnowmobileassociation.com</a></small>	
Family member cards	
Business member cards	
Family member decals	
Business member decals	
Business certificates <small>or print copies at <a href="http://www.mainesnowmobileassociation.com">www.mainesnowmobileassociation.com</a></small>	
Super Raffle Tickets	

Other requests / questions: \_\_\_\_\_

Club Name: \_\_\_\_\_

Membership Chair: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
 \_\_\_\_\_

Phone #: \_\_\_\_\_

OFFICE USE:  
 DATE RECEIVED \_\_\_\_\_

CHECKS : \_\_\_\_\_

AMOUNT: \$ \_\_\_\_\_

CASH: \$ \_\_\_\_\_

OVER OR UNDER PMT: \$ \_\_\_\_\_

Please enter each submitted member's name, mailing address & card number. If a Supporting Business Membership, check the appropriate box.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
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CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
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CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
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CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
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CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CARD #: \_\_\_\_\_

BUSINESS MEMBERSHIP      PHONE: \_\_\_\_\_  
optional