



2025-2026 MEMBERSHIP APPLICATION

Please mail the completed application with payment to:
Hodag Sno-Trails Inc., Membership
P.O. Box 621
Rhinelander, WI 54501



TYPE OF MEMBERSHIP: ☐ Single Membership - \$35 ☐ Family Membership - \$45
(includes spouse and/or children 18 or younger)

Hodag Sno-Trails Membership year starts July 1st and ends June 30th

Primary Member First and Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Email: _____

For FAMILY Membership Only:

Spouse First and Last Name: _____

Child 1 First and Last Name & Age (must be under 19): _____

Child 2 First and Last Name & Age (must be under 19): _____

Child 3 First and Last Name & Age (must be under 19): _____

Child 4 First and Last Name & Age (must be under 19): _____

1. If your permanent place of residence is in Oneida County, WI, please check the municipality of your residence: Town of: ☐ Crescent; ☐ Enterprise; ☐ Monico; ☐ Newbold; ☐ Pelican; ☐ Pine Lake; ☐ Piehl; ☐ Schoepke; ☐ Stella; ☐ City of Rhinelander;
2. If your permanent place of residence is outside of Oneida County, WI, please check "other"
Other ☐ _____
3. Your HST membership includes membership to the Association of Wisconsin Snowmobile Clubs (AWSC). Are you a member through a different Wisconsin snowmobile club? ☐ Yes ☐ No
4. Hodag Sno-Trails is a volunteer organization. Please indicate any activities in which you would be willing to participate: ☐ Trail Maintenance; ☐ Grooming; ☐ Map Ad Committee;
☐ Fundraising; ☐ Landowner Appreciation Banquet; ☐ Other _____

Suggestions / Ideas / Comments: _____

For Office Use Only:

Date: _____ Check # _____ Cash _____ Amount Enc. _____

Received by: _____