

AWSC COMMERCIAL SPONSORSHIP FORM

Commercial Sponsor Program (\$50)

Name of Business:	
Owner's First Name:	Last Name:
Spouse First Name:	Last Name:
Business (Physical) Address:	
City, State, Zip:	
Mailing Address (if different than above)	
Street Address:	
City, State, Zip:	
County where business is located:	
Business Category – please select the <u>one</u> that	best describes your business:
Accommodations Food/Drink/Lodging Automotive Fuel/Convenience Bank/Credit Union Grocery/Food Relat Construction Hardware Food/Drink Insurance	Lodging Signage
Business Website:	
Business Phone #(s):	
Please provide some descriptive information about y number if located on trail, ample room for trailer par	your business for the AWSC website (hours, specialties, trail rking, etc.):
Club Sponsor:	
	re eligible for the \$10 Trail Pass for personal snowmobiles, ered in Wisconsin, under business name require \$30 Trail Pass.)
Send completed form and check for \$50 to your spor	nsoring snowmobile club.
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Questions? Call AWSC at 800-232-4108/608-846-5530 or email: awsc@awsc.org or stormyh@awsc.org

If you are not joining through a club mail form and check to: AWSC, 529 Trail Side Dr., Suite 200, De Forest, WI 53532