

SNOWMOBILE CLUB INFORMATION FORM

PLEASE RETURN FORM TO:
Department of Conservation
Bureau of Parks and Lands-Snowmobile program
22 SHS
Augusta, ME 04333-0022
1-800-462-1019 or 287-4957

To maintain accurate records, it is necessary for each club to provide the information below on a yearly basis, even if the address or officers do not change. If your club is no longer an active club please write **INACTIVE** with the club name and return this form so that we can keep our records current.

All clubs are encouraged to obtain a permanent PO Box or mailing address.

PLEASE PRINT CLEARLY

CLUB INFORMATION

CLUB NAME:	_____		
TOWN LOCATED:	_____	COUNTY:	_____
MAILING ADDRESS: (permanent address)	_____ _____		
SHIPPING ADDRESS (for sign orders) <u>NO</u> PO BOX NUMBERS	_____ _____		
MONTH OFFICERS ARE ELECTED:	_____		

OFFICER INFORMATION:

PRESIDENT NAME:	_____	EMAIL:	_____
HOME PHONE:	_____	OFFICE PHONE:	_____
TRAIL MASTER:	_____	EMAIL:	_____
HOME PHONE:	_____	OFFICE PHONE:	_____

PLEASE COMPLETE THE FRONT AND BACK OF THIS FORM

**STATE OF MAINE
NEW VENDOR OR VENDOR UPDATE FORM**

**ALL SNOWMOBILE CLUBS, NEW OR OLD MUST COMPLETE THIS FORM
SIGNATURE REQUIRED AT BOTTOM**

EMPLOYER ID # (EIN): <u> E </u>	
(Federal ID number)	(nine digit number)

<u>NEW VENDOR INFORMATION:</u> (new clubs only)	
CLUB NAME:	_____
MAILING ADDRESS:	_____
CITY/STATE:	_____ ZIP: _____

<u>VENDOR UPDATE:</u> (existing clubs)	NEW INFO	OLD INFO
CLUB NAME:	_____	_____
MAILING ADDRESS:	_____	_____
CITY/ STATE:	_____	_____
ZIP:	_____	_____

Submitted By: _____ Date: _____

Title & Phone # : _____

I certify that the above information is accurate & correct as of this date. I am responsible for updating & maintaining this information on a regular basis by written communication via this form.

For official use only:

- Change request
- New Vendor
- Multi address
- Annual update

State Agency & SHS: **Dept. of Conservation SHS #22**

Agency Contact Person: **Shannon Morin / ORV**

Contact's Phone Number: **287-4957**