



2024-2025 Commercial Sponsorship Membership Form

Name of Business: _____

Owner's First Name: _____ Last Name: _____

Spouse's/Co-Owner's First Name: _____ Last Name: _____

Business (Physical) Address: _____

City, State, Zip: _____

Mailing Address (if different than above):

Street Address: _____

City, State, Zip: _____

Business Website: _____

Business Phone Number(s): _____

Business Email: _____

Facebook Page: _____

Please provide some descriptive information about your business for the website (hours, specialties, trail number if located on trail, ample room for trailer parking, etc.): _____

Business Category—please select the one that best describes your business:

- | | | | |
|--|---|---------------------------------------|---|
| <input type="checkbox"/> Accommodations | <input type="checkbox"/> Food/Drink/Lodging | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Automotive | <input type="checkbox"/> Fuel/Convenience | <input type="checkbox"/> Lodging | <input type="checkbox"/> Sales/Service/Parts/Access |
| <input type="checkbox"/> Bank/Credit Union | <input type="checkbox"/> Grocery/Food Related | <input type="checkbox"/> Organization | <input type="checkbox"/> Signage |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Hardware | <input type="checkbox"/> Printing | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Food / Drink | <input type="checkbox"/> Insurance | <input type="checkbox"/> Professional | |

| Amount | Description |
|----------------|-----------------------------------|
| <u>\$50.00</u> | Commercial Sponsorship/Membership |
| _____ | Trail Fund Donation |
| _____ | Total Enclosed |



Note: Commercial Sponsors joining through a club are eligible for the \$10 Trail Pass for personal snowmobiles registered in Wisconsin, in their name. (Sleds registered in Wisconsin, under business name require \$30 Trail Pass.)

Please enclose this form, a business card (or similar size graphic to be posted on our website “sponsor page”) with payment and mail to NLSC, PO Box 344, Three Lakes, WI 54562. Questions may be directed to Joyce Nykolayko - (membership@northernlightsclub.com or call 715-617-2647).