## **NWMTPA**

## Northwest Missouri Tractor Pullers Association 2025 Membership Application

| First Name – Middle Initial – Last Name               |               |
|---|---------------|
| Address   |               |
| City- State- Zip                                      |               |
| Social Security Number (Required)                     |               |
| Main Contact Phone #                                  |               |
| Email Address   |               |
| Membership Signature:                                 |               |
| Vehicle Information                                   |               |
| Vehicle Name  |               |
| Make – Model  |               |
| Class_  |               |
| Please Mark Type of Membership                        | Paid          |
| Full Membership before May 1st (Voting & P            | oints) \$150  |
| Full Membership after May 1st (Voting & Points) \$250 |               |
| Single event membership (Nonvoting & no p             | points) \$ 50 |

## Please make all checks payable to **NWMTPA**

Please Mail to:

Jessica Stoll

31105 150<sup>th</sup>

Hopkins, MO 64461