

**Completed Membership
Registration Form
Due by**

June 1, 2026



Please mail completed
Registration to:
Tom Anderson, P.P., Sec/Treas
47948 Copperwood Circle
Harrisburg, SD 57032
Phone: 605.366.6238
Email: msmcasec@gmail.com

Weight Classifications

2WhFthr: 0-199cc MultiFthr: 0-125 lbs 3WhRubberLtWt: 0-150 cc 3Wheel Slide Trike – 1 Class
2WhLtWt: 200-649cc MultiLtWt: 126-249 lbs 3WhRubberMdWt: 151-499 cc only
2WhMed: 650-1339cc MultiMdWt: 250-999 lbs 3WhRubberHvy: 500+ cc
2WhHvy: 1340+cc MultiHvyWt: 1,000+ lbs

“Showmanship Class” – All Sizes Eligible

Shrine _____ Unit Name _____

of Wheels _____ Year _____ Make/Model _____

Weight Classification _____

4 WHEEL MUST HAVE WEIGHT CERTIFICATE

DRILL FIELD _____ (Approx. # of Riders) **OBSTACLE COURSE** **2WH SLOW RIDE** **Showmanship Ride**

Our required brief field announcement (history) is up to date. Our required brief field announcement (history) is attached.

We intend to compete this year in the Motorized Competition. Enroll the following members:

We do not intend to compete this year in Motorized Competition, but submit these members to support MSMCA

Approximately _____ members & guests will attend the AWARDS BANQUET (Everyone is Welcome!)

Dues: \$25/member – \$150 minimum/unit – \$400 maximum/unit *Past Presidents are life members – NO dues*

Number of Members _____ @ \$25 = \$ _____ Check (payable to MSMCA) Venmo (@msmca; code: 6602)

1) 1st Representative (Title: Capt., Pres., etc.) _____ **Name** (First, Last) _____
Address _____ City _____ State/Prov _____ Zip _____
Phone _____ Email _____

2) 2nd Representative (Title: VP, Lt, Sec., etc.) _____ **Name** (First, Last) _____
Address _____ City _____ State/Prov _____ Zip _____
Phone _____ Email _____

Please note – only the two representatives above will receive communications from the MSMCA Board

Additional Unit Members (Please Print Legibly) (Mark your MSMCA Past Presidents – NO dues required):

3.	4.	5.
6.	7.	8.
9.	10.	11.
12.	13.	14.