



Thoroughbred Flying Club Membership Application

APPLICANT INFORMATION

NAME:			
ADDRESS:			
PHONE:	EMAIL:	AGE:	DOB:
EMERGENCY CONTACT NAME:			
PHONE:	EMAIL:		
ADDRESS: (IF DIFFERENT FROM ABOVE)			

EMPLOYER INFORMATION

EMPLOYER:	
ADDRESS:	
PHONE:	OCCUPATION:

PILOT INFORMATION

FLYING HOURS/TOTAL:	LAST 6 MONTHS:
TIME IN CLUB A/C TYPES: Cessna 172: Cessna 182: Cirrus SR22:	
CERTIFICATES HELD:	DATE ISSUED:
CERTIFICATE NUMBER:	MEDICAL CLASS:
LAST BFR DATE:	MEDICAL DATE:
HOW MANY HOURS DO YOU PLAN TO FLT NEXT YEAR?	
DATE OF LAST FLIGHT:	

Have you been (check all that apply):

In any aircraft accidents or incidents _____ Y _____ N
Charged with violation of FAA regulations _____ Y _____ N

If Yes include Basic details:

In any motor vehicle accidents in past 3 years _____ Y _____ N
Issued moving traffic citations in past 3 years _____ Y _____ N

If Yes include Basic details:

I am applying to join at this level of membership:

_____ **Basic** _____ **Basic Plus** _____ **Advanced**

Please include copies of Driver's license, current medical and pilot certificate with this application.

I understand that the Board of Directors and the membership of the Thoroughbred Flying Club determine my acceptance in the Club. If I am accepted, I agree to adhere to the procedures and regulations as outlined in the Club's constitution, by-laws, membership rules and decisions set forth by the Board of Directors. I also agree that that flying is risky and I as the Pilot in Command is responsible for the safe operation of the aircraft and its passengers. In signing the member is assuming Full responsibility for any risk of bodily injury, death or property damage. Further, in signing I agree to hold harmless Thoroughbred Flying Club Inc. including Board of Directors, officers, other members and any owner or owners of leased or operated by on on-behalf of Thoroughbred Flying Club Inc.

Applicant Signature: _____ Date: _____

APPROVAL

BOARD MEMBER INITIALS:	BOARD MEMBER INITIALS:
BOARD MEMBER INITIALS:	BOARD MEMBER INITIALS:
APPLICATION RECEIVED:	DATE APPROVED: