

Thoroughbred Flying Club Membership Application

I am applying to join at this level of membership: __Eagles ____ Basic ____ Basic Plus ____ Advanced **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: Citabria: Tailwheel: Tailwheel Endorsement: Cessna 172: Cessna 182: Cirrus SR22: CERTIFICATES AND RATINGS: 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	YN
Charged with violation of FAA regulations If Yes include Basic details:	YN
In any motor vehicle accidents in past 3 years	YN
Issued moving traffic citations in past 3 years If Yes include Basic details:	YN
Please include copies of Driver's license, Pilot C	ertificate and Current Medical or Basic Medical
Certification with this application.	
I understand that the Board of Directors and the memmy acceptance in the Club. If I am accepted, I agree to outlined in the Club's constitution, by-laws, members Directors. I also agree that that flying is risky and I as operation of the aircraft and its passengers. In signing risk of bodily injury, death or property damage. Further Flying Club Inc. including Board of Directors, officers or operated by or on on-behalf of Thoroughbred Flying	to adhere to the procedures and regulations as hip rules and decisions set forth by the Board of the Pilot in Command am responsible for the safe g the member is assuming Full responsibility for any er, in signing I agree to hold harmless Thoroughbred s, other members and any owner or owners of leased
Applicant Signature:	Date:
APPROVAL By Board on:	