

Reviewed by:

Pres.	
V. P.	
Sec.	
Treas.	
Director	
Director	
Director	
Director	
Director	
Director	



Office Use Only

Date Received	
Received by	
Amount Paid	
Payment type	
Check #	
Receipt #	

Assigned Type:

Reg \$115	
Assoc \$125	
Reg/65+ \$60	
Assoc/65+ \$60	
Spouse Card \$25	

MEMBERSHIP APPLICATION

Last Name		First Name		Initial		Home Phone	
Street Address						Cell Phone	
City				State		Zip	Marital Status/Spouse's Name
Date of Birth / /		E-mail Address					
Employer			Occupation			Work Phone	
FAA (or military) Certificates Student Solo ATP ATC Private A & P CFI Commercial I A Parachutist Other Ratings: _____				Hobbies and Interests:(circle all that apply) Golf Fishing Boating Hunting Shooting Tennis Running Poker Chess Photography Cooking Other: _____			
Would you like to be included in the Aero Club Social Directory? Yes No							
Do you have any skills / talents that you would like to use to help out the Aero Club? i.e. Plumber, electrician, fund raiser etc?							
Would you be interested in serving on a committee? Yes No							
Previous Aero Club member? YES NO If YES, when and reason for leaving?							

Sponsored by: (print and sign -- must be regular member)
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Recommended by: (print and sign) Four are required.	
1:	2:
3:	4:

I agree to abide by the constitution and by-laws of the Aero Club and to support it.	
Date	Signature of Applicant