

7B Flying Club Membership Application

CLUB MISSION AND PURPOSE

The purposes of the Club are:

- To promote camaraderie and fellowship among members through the operation of private aircraft based in Sandpoint, Idaho.
- To maintain or lease aircraft for the educational, personal, and general use of the membership.
- To advance the science of aeronautics, encourage interest in aviation within the community, and promote safe flying practices.
- To provide convenient and affordable opportunities for recreational flying, as well as for the improvement and maintenance of members' flying skills.

Note: The Club is organized under IRS Code Section 501(c)(7) as a nonprofit social club.

MEMBERSHIP EXPECTATIONS

The Club is built and sustained by the active participation of its members. By joining, you agree to:

- **Support the mission** of the Club and help foster a spirit of camaraderie and fellowship.
- **Participate** in regularly scheduled membership meetings whenever possible.
- **Fly the Club aircraft regularly** to maintain proficiency and contribute to safe operations.
- **Volunteer time and skills** to assist with Club activities, events, and projects as needed.
- **Promote safe and responsible flying** within the Club and the broader aviation community.

Membership in the Club is a privilege. Members who consistently fail to meet these expectations may have their membership reviewed by the Board.

INSTRUCTIONS

Submit the following application packet at our membership meetings or via email.

(1) Completed application form (included in this form),

(2) Copies of the following:

Licensed Pilots

- Airman's certificate
- Last 2 signed logbook pages
- Flight review
- Medical certificate

Student Pilots (if student has no IACRA or Medical, please contact a Club CFI)

- *IACRA Student Pilot Application ID*
- *Medical Certificate*

(3) Applicants will share a short bio, background, and aviation goals—either at a club meeting or in a brief chat with a few board members.

WAITLIST

If there are no membership openings, applicants will be added to a waitlist in the order received. When a membership seat becomes available, the applicant will be contacted by phone and email. The applicant will have seven (7) calendar days to confirm their interest. Once approved for membership, they will set up payments in Flight Circle, including the initial \$500 initiation fee and the first month's dues. Failure to respond within the allotted time may result in the applicant being removed from the waitlist.

ACCEPTANCE

An applicant will become a member once the above criteria are met and upon the majority vote of the Board.

APPLICANT IS APPLYING AS (CHECK ONE):

Active Member (Private/Commercial/ATP) ☐

Student Member ☐

Affiliate (CFI Only) ☐

PERSONAL INFO

FIRST, MI, LAST NAME: _____

PREFERRED NAME (nickname): _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

DOB: _____ AGE: (AT TIME OF APPLICATION) _____

DRIVER'S LICENSE #: _____

CONTACT PHONE: _____

CONTACT EMAIL: _____

EMPLOYER: _____

EMERGENCY CONTACT: _____ RELATION: _____

EMERGENCY CONTACT PHONE: _____

AIRMAN'S CERTIFICATE AND MEDICAL INFORMATION (If applicable)

AIRMAN'S CERTIFICATE #: _____ DATE ISSUED: _____

RATINGS AND LIMITATIONS: _____

TOTAL HOURS: _____ DATE OF LAST FLIGHT REVIEW: _____

MEDICAL CLASS: _____ DATE OF LAST MEDICAL: _____

QUESTIONNAIRE (Required for insurance purposes)

Please answer **Yes or No** to the following. If "Yes," provide dates and details below.

- 1) Have you been cited for an FAA violation in the last 3 years? Y / N
- 2) Do you have any physical impairments, waivers, or limitations listed on your medical certificate (other than corrective lenses)? Y / N
- 3) In the past 3 years, have you been involved in any aviation accident, incident, or insurance claim? Y / N
- 4) In the past 3 years, have you been convicted of, or pled guilty/no contest, to any of the following:
 - DUI or reckless/drunk driving
 - Drug charges or possession
 - Any felony or misdemeanor (other than parking violations)Y / N
- 5) In the past 3 years, has an insurance company:
 - Declined or cancelled aviation insurance for you,
 - Refused to renew your aviation insurance, or
 - Declined your application for aviation insurance?Y / N
- 6) In the past 3 years, have you had your pilot or driver's license suspended, revoked, or surrendered, OR been arrested/charged with operating an aircraft or motor vehicle under the influence of drugs or alcohol? Y / N

If you answered "Yes" to any question above, please provide dates and explanations below:

By initialing each item below, I acknowledge and agree to the following:

ACKNOWLEDGMENTS	INITIALS
I have read and understand the Club's Bylaws and Operating Rules , and I agree to abide by them, as well as all applicable FAA regulations and other governing rules.	
I will not use Club aircraft for commercial purposes or any illegal activity.	
I agree to pay all dues, fees, and assessments as required. I understand that failure to do so may result in suspension of privileges or termination of membership.	
I may voluntarily resign from the Club at any time by providing written notice to the Secretary.	
My membership may be terminated by a majority vote of the Board of Directors if I fail to comply with Club rules or expectations.	
If I am found responsible for damage to Club aircraft or equipment due to negligence or violation of rules/regulations, I will be responsible for the applicable insurance deductible and any associated costs not covered by insurance.	

Certification

I certify that all information provided in this application is true and correct to the best of my knowledge.

Applicant Printed Name: _____

Applicant Signature: _____ Date: _____

(If under 18)
Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____ Date: _____