HARRISBURG AREA FLYING SOCIETY

MEMBERSHIP APPLICATION

Mailing Address:	Harrisburg Area Flying Society (H.A.F.S.) Attention: Treasurer		☐ New Member
			\Box Annual Renewal
F	P.O. Box 60622		
H	Harrisburg, PA 17106-0	0622	Please Print Clearly and Legibly!
Name:		AMA#	(Required)
Address:			
City:	State:	Zip Code:	
Email 1:	Email 2 (optional):		
Your membership proof of club by the executive cortical calendar year, you are apparent any applicant fly without of each year will be subject to the control of the contro	will be mailed to you one nmittee, so membership oplying as a new member a current AMA member ect to a \$25 late charge (I younger with an AMA at Monday of the month, owing calendar year.	ce accepted into the club. Note is not immediate. If you have, even if you were a membership and proof of H.A.F.S. monoceptions). And adult active guardian memorialization is by email. Ne	SASE stamped, self-addressed envelope. ew members must be accepted into the ave not been a member in the most recent er in the past. Under no circumstance can embership. Renewals after December 31, ember in attendance. Monthly meetings w members after Aug. 1 dues count for the juiries contact the club officers by emailing embers.
Complete Payment	Information:		
Regular Annual Members	ship \$(\$75)	
Late Fee	\$(\$25 not postmarked by Dec	. 31)
Additional member	\$(\$25 same household)	
Optional Donation	\$(Donations always appreciate	ed)
Total Enclosed	\$		

Mail Completed Application with 1. Check, 2. Self-Addressed Stamped Envelope, and 3. AMA proof to the above address. Applications without AMA proof will be rejected.