

2019 Membership



Name: _____

Home Address: _____

Phone #: _____

E-Mail: _____

AMA#: _____ Transmitter: 2.4 _____ 72MHZ _____

(Please send a copy of your AMA & FAA card with your application) (Membership dues are due by 3/31 of each Year)

Please Check One of the Following:

\$60.00 Full-Membership – NEW ☐ ☐ FREE-Junior Membership-16 Years old or Younger

\$50.00 Full Member – Renewal ☐ ☐ Donations – Non Flying \$ _____

Parent / Guardian Signature _____

(Required if applicant is under 17 years old)

Make checks payable to Michiana Skyraiders, INC.

Mail To: Michiana Skyraiders, Inc., c /o Luis R Espinosa 4912 N 200 E LaPorte IN 46350

OFFICE USE ONLY:	Permit Issued <input type="checkbox"/>	Paid by Check <input type="checkbox"/>	Paid By Cash <input type="checkbox"/>	Comments
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