



## 2010 Membership Application

Please make sure that your handwriting is legible for documentation purposes.

USE THIS APPLICATION FOR **ONE INDIVIDUAL ONLY**

Other family members need to fill out a separate form and attach for the family membership.

This application is for ( ) RENEWAL or ( ) NEW MEMBER (check one)

This application is for ( ) Open, ( ) Family, ( ) Junior, ( ) Honorary

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_

Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Primary Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Alt. Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

E-Mail: \_\_\_\_\_

AMA Number: \_\_\_\_\_

Flying freq. most used: \_\_\_\_\_

Must be a current AMA member to fly at the field.

**SAFETY DECLARATION** (All members must sign annually)

Applicant Certification: I agree to abide by the Collective R/C Rules, By Laws, Constitution, and AMA Safety Code.

Applicant Signature \_\_\_\_\_