

KAMLOOPS MODEL AIRPLANE SOCIETY MEMBERSHIP APPLICATION

| | | | | | | | | | | | | | |
|---|-------|--|--|----------------|-------|------|-------|--------|------|--------------------------|------|----------|------|
| DATE: | | | | | | | | | | | | | |
| NAME: | | BIRTHDAY: ___/___/___ | | | | | | | | | | | |
| ADDRESS: | | | | | | | | | | | | | |
| PHONE NUMBER: | | CELL NUMBER: | | | | | | | | | | | |
| EMAIL: | | | | | | | | | | | | | |
| MAAC NUMBER: | | CHECKED BY: | | | | | | | | | | | |
| MEMBERSHIP: OPEN JUNIOR FAMILY | | | | | | | | | | | | | |
| If family membership, please list name of additional family members and birthdates below: | | | | | | | | | | | | | |
| 1. | | | | | | | | | | | | | |
| 2. | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | |
| Do you need flight instruction? Y N | | If no, you will be required to take a check out flight by a KMAS instructor. | | | | | | | | | | | |
| Checked out by: | | Date of check out flight: | | | | | | | | | | | |
| Where did you acquire your wings or training? Were you self taught? | | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Initiation Fee</td> <td style="text-align: right;">\$100</td> </tr> <tr> <td>Open</td> <td style="text-align: right;">\$100</td> </tr> <tr> <td>Junior</td> <td style="text-align: right;">\$50</td> </tr> <tr> <td>Additional Family Member</td> <td style="text-align: right;">\$50</td> </tr> <tr> <td>Gate key</td> <td style="text-align: right;">\$15</td> </tr> </table> | | Initiation Fee | \$100 | Open | \$100 | Junior | \$50 | Additional Family Member | \$50 | Gate key | \$15 |
| Initiation Fee | \$100 | | | | | | | | | | | | |
| Open | \$100 | | | | | | | | | | | | |
| Junior | \$50 | | | | | | | | | | | | |
| Additional Family Member | \$50 | | | | | | | | | | | | |
| Gate key | \$15 | | | | | | | | | | | | |
| What other interests do you have besides flying? | | Fees | | | | | | | | | | | |
| | | Initiation : | | | | | | | | | | | |
| | | Open: | | | | | | | | | | | |
| | | Junior (no initiation fee) | | | | | | | | | | | |
| | | Additional member 1: | | | | | | | | | | | |
| | | Additional member 2: | | | | | | | | | | | |
| | | Additional member 3: | | | | | | | | | | | |
| | | Gate: | | | | | | | | | | | |
| Total paid: | | | | | | | | | | | | | |
| Application must be signed by two club members in good standing and then approved at the next executive meeting. | | | | | | | | | | | | | |
| 1. _____ | | 2. _____ | | | | | | | | | | | |
| Name: | | Name: | | | | | | | | | | | |
| Approved on _____ | | | | | | | | | | | | | |
| Please mail the completed form and payment to (make check out to Kamloops Model Airplane Society) Bruce Cline KMAS Membership Coordinator 771 10 th St., Kamloops BC, V2B2Z5 | | | | | | | | | | | | | |