



MEMBERSHIP APPLICATION

Regular ___ Junior ___ Associate ___

Name _____

Address _____

City _____ State ___ ZIP _____

Phone # (____) _____ - _____

E-Mail Address _____

AMA # _____ FAA # _____

Years of RC model piloting experience _____

Your primary RC interest _____

In addition to our instructor's check out, do you need additional help? _____

Explain _____

If accepted as a member of the H.A.M., A.M.A. Club charter #314, I agree to abide by AMA regulations and Club's flight and field rules and by-laws. I will have my equipment and abilities approved by one of the club's authorized instructors before flying, and I am willing to offer my time and efforts toward club projects.

Applicant Signature _____ Date _____

Initiation fee \$75.00 Dues \$75.00 Received by _____

Club Approved _____ Reported to AMA _____ by _____

Mail this application, with check and proof of AMA membership to:

**Hernando Aero Modelers
P.O. Box 5198
Spring Hill, FL 34611-5198**