

**MEMBERSHIP APPLICATION
FLORENCE AREA RC AIRCRAFT ASSOCIATION
AMA Charter # 4634**

NAME: _____

CLUB YEAR: _____ **DATE:** _____

***AMA NUMBER:** _____

MEMBERSHIP TYPE (mark all that apply):

FAMILY _____ FLYING (Regular) _____ Flying (Park) _____

BIRTHDATE: _____

PRIMARY ADDRESS: _____

EMAIL ADDRESS: _____

TELEPHONE NUMBERS:

HOME:

CELL:

RADIO CHANNELS IN USE: _____

AMA Clubs where you have flown or belonged in the last five years:

Certification:

I hereby apply for membership in the Florence Area RC Aircraft Association and by so doing I certify that the information provided above is complete and accurate and I further agree to comply with the safety policies and rules of the Academy of Model Aeronautics and the Florence RC Aircraft Association.

Signature/date

* You are required to have a current AMA membership to be accepted for a flying membership in the club.