SEQUIM R/C AERONAUTS MEMBERSHIP APPLICATION

NAME:				
ADDRESS	S:			
CITY		STATI	EZ	ZIP
HOME PH	E PHONE()E-MAIL ADDRESS			
AMA NUI	MBER	FAA NUMBER		
PRIOR R/	C EXPERIENCE (NU	UMBER OF YEAR	S)	
R/C INTE	REST: () PATTER	N, () IMAC, () S	SCALE, () F	REE FLIGHT,
() ELEC	TRIC, () HELICOP	TER, () FUN FLY	Y, () SPORT	C,() GLIDERS,
() 3D, () MULTI-ROTOR,	() OTHER		
I HEREBY	Y AGREE TO ABIDE	E BY ALL AMA RI	ULES AND T	HE CONSTITUTION
BY-LAW	S, AND FIELD RUL	LES OF THE SEQU	IM R/C AERO	ONAUTS.
SIGNED DATE				
	may be mailed to:			
		Sequim R/C Aero P.O. Box 1336 Sequim, WA 985	6	
Initiation I	Fee Paid \$	Dues Paid \$_	Dues Paid \$	
\$15.00	\$7.50	\$50.00	\$25.00	\$75.00
Adult	Under 18	Adult	Under 18	Family
				Oth will be granted ving year as well.)
If this forn	n is mailed, you must	include a photocopy	y of your curre	ent AMA card.

Club meets every third Tuesday of the month at 6:45 PM at the Mariner Cafe, 609 W. Washington St. in Sequim.