

Ann Arbor Flyers

	Name (Last/First/Middle)
APPLICATION for MEMBERSHIP	
	Address
	City/State/Zip
Application Date	Mobile Phone
Introduction Date	Home/Work Phone
Initiation Fee Date	E-mail address
Interview Date	
Voting Date	Driver's License #

Date of Birth	Personal Reference (address, telephone & relationship)
Married (Yes/No) # children	
Spouse's Name	Personal Reference (address, telephone & relationship)
Citizenship	
Are you a former AAF (Yes/No)	Credit Reference (include bank name)
If Yes, when?	

Total Hours	<i>Use the reverse side for an explanation if any questions are answered Yes</i>
Pilot License #	Have you ever been:
Medical type/date	In any aircraft accident, incident, or had FAR violation? (Yes/No)
Limitations	Charged with violation of FAA regulations (Yes/No)
Ratings	Convicted of a crime? (Yes/No)
Date began flying	In any motor vehicle accidents in past 3 years? (Yes/No)
Date of private license	Issued moving traffic citations in past 3 years? (Yes/No)
Last time flown	Convicted for operating a motor vehicle while under the influence of alcohol or drugs? (Yes/No)

Types of aircraft which you have been PIC?	
Where have you rented aircraft?	
Flight Instructor (Include address)	
Your special talents that could contribute or assist the AAF Operations	
List other flying clubs, social or professional organizations in which you are or have been a member	

Present Employer	Previous Employer
Address	Address
City/State/Zip	City/State/Zip
Phone Number	Phone Number
Number of Years Employed	Number of Years Employed
Brief Job Description	Brief Job description

I certify that the above answers are true and complete to the best of my knowledge. If accepted for membership, I agree to abide by the Operating Procedures and By-Laws of the Ann Arbor Flyers, Inc., and promptly pay all invoices. I further understand that any falsification of this application is sufficient grounds for expulsion from the Ann Arbor Flyers, Inc.

Signed	Date
Sponsor	Date

Enter Any Explanations/Comments:

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