



Sky Rovers R/C Flying Club, Inc. Membership Application

Name _____

Address _____ City _____ State _____ Zip _____

Telephone () _____ E-Mail _____

Main Interest: RC Free Flight Control Line Other _____

Do you hold an FCC license? Yes License No. _____

Do you hold an Academy of Model Aeronautics license? Yes No License No. _____

Have you ever belonged to a model aviation club? Yes No

If Yes, please provide club name and your involvement _____

List frequencies of currently owned and operated radio equipment _____

What types of aircraft do you fly? _____

What skills and knowledge can you contribute to our club? _____

I agree, as a member of the Sky Rovers R/C Flying Club, Inc., to abide by the club's rules and regulations as set forth in the Sky Rovers R/C Flying Club, Inc. Constitution.

X _____ Date _____