



SAM 27 Membership Application

Name: _____

Address: _____

City: _____

State: _____ **Zip Code:** _____

Home Phone: _____ **Cell Phone:** _____

E-mail Address: _____

O.K. to publish on Club roster? _____. Or for Club Secretary use only _____.

Primary Interest: RC ____ Freeflight ____ Non-flying ____

AMA Number: _____ **(Required) Expiration Year:** _____

I will abide by the AMA National Safety Code, The Club's Bylaws, and The Club's Field Safety Rules.

Applicant Signature: _____ **Date:** _____

Accepted by:

President: _____ **Vice President:** _____

Safety Orientation Date: _____ **Solo Date:** _____

Verified by: _____ **Verified by:** _____

Build Date: _____

Verified by: _____