

FORT MEADE FLYING ACTIVITY

MEMBERSHIP APPLICATION

(Please print clearly or type)

Personal Information

Name: _____
Last First MI

Home Address: _____
Street City State Zip

Phone: _____ Email: _____
Home Work Cell

Employer: _____

Emergency Notification: _____
Name Address Phone

Date of Birth: _____
Day - Month-Year

Eligibility Information (Attach copies of eligibility ID)

Eligibility: Active Duty Military Reserve Military Retired Military ROTC
 CAP (attach recommendation from Unit CC) DoD Civilian Dependent
 Other (List) _____

How did you learn about FMFA? _____

Letter of Good Standing from a prior Club? Yes (Attach Copy) No - \$40.00 Initial Fee Paid by: Credit Card Check/M.O.

Dues Payment: Annually by: Credit Card Check/Money Order Monthly by: EFT Form Attached

Amount Paid: _____ (Make checks/Money Orders payable to **Civilian Welfare Fund**)
(Must be through fiscal year)

License/Rating Information (Attach copies of Licenses, Medical, Flight Review, Logbook, & Photo ID. Students must provide a copy of their passport or birth certificate to satisfy TSA requirement.)

Rating Type: SEL MEL Rotorcraft
License: Student Private Instrument Commercial ATP Multi
CFI Rating: CFI CFII MEI

Medical Expires: _____

Statement of Understanding (Please Read the Privacy Act of 1974 Statement on Reverse)

If my application is accepted by the Fort Meade Flying Activity, I will abide by the provision of the Activities Constitution, By-Laws, and Regulations. I understand that all fees, dues, aircraft rental and other charges are payable in advance and that the club is prohibited from extending credit to anyone.

Signature of Applicant Date

Approved By: _____ Date