



# Membership Application

(This form must be completed each year by all members)

Name \_\_\_\_\_ Nick Name \_\_\_\_\_ Birthday \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

AMA # \_\_\_\_\_ Radio Frequencies Used \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Email Address \_\_\_\_\_

In what Year did you start modeling? \_\_\_\_\_

Experience Level (Check One):    \_\_\_ Beginner    \_\_\_ Pilot    \_\_\_ Instructor

### Fee Schedule

- |   | <u>(Check one):</u> |
|---|---------------------|
| • New member _____ or Renewal _____ (Check one)   | \$100.00 _____      |
| • Family Membership (Each additional Family Member at same address must complete a separate application) \$10 each Family member. | \$ 10.00 _____      |
| • Full Time Student (18 and under)  | \$ 10.00 _____      |
| • Life Time Membership since _____  | \$750.00 _____      |
| • Life Time Family Membership (non-flying) since _____  | \$ 75.00 _____      |

**Applicants must provide proof of current Academy of Model Aeronautics (AMA) Membership**

If I am accepted as a member of the Fort Bend R/C Club, I hereby agree to abide by the rules and safety regulations set forth by the Club and the Academy of Model Aeronautics (AMA).

Signature \_\_\_\_\_ Date \_\_\_\_\_

Attach Photo copy of AMA  
Membership Card or AMA web  
renewal confirmation form.  
  
(Required)

Mail a signed and completed membership application along with a check (payable to "Fort Bend R/C Club") and photocopy of current AMA Membership card to:

Fort Bend R/C Club  
P.O. Box 667  
Sugar Land, TX 77478-0667

Alternatively, you can bring the above items to the next Club meeting and give them to the Club Secretary or Treasurer.

**For Club use only:**

**Paid Cash:** \_\_\_\_\_ **Check:** \_\_\_\_\_ **AMA Verified:** \_\_\_\_\_ **Club Roster:** \_\_\_\_\_ **Badge Issued:** \_\_\_\_\_