

fee for your application):

Flying Crop Dusters

Club Membership Application

Mail application with your check (made out to Bob Dover) and a self-addressed stamped envelope to:

Bob Dover 4520 Indian Creek Rd. Emmaus, PA 18049

Please Print! You must be a current AMA member, and your AMA member number is required for application!

Date of	Birth:		Date of Application:					
Name:_				Phone:		Email:_		
Address	s:				_ AMA#:	II	ЛАА#:	
City:					State:		Zip:	
Employ	er Name:							
Sponsor	r Name (must b	e a current Fly	ing Crop Dus	sters member):				
Brief Ba	ackground (RC	experience, ho	bbies, interes	sts, other club me	mberships, etc.):			
Are you	willing to help	out with club a	activities? (ci	rcle one): YES	NO			
					to assist with? (cinon (if qualified)			
1) 2) 3) 4) 5) 6) Defaultimember	You complete You keep your You are subjec You recognize You are respong on items 1 or ship dues for rei	the application Flying Crop Det to the club rul that we are all asible for your gastatement. Vio	nding of the A process accor- usters club du es and AMA: governed by t guests at all tir membership p lation of the r	Academy of Model ding to the Flying es current (paid an rules for safety and he AMA Safety Co mes. They are welch rivileges and require	d conduct ode comed at the field and ire a resubmission o Il make your memb	pership Applicate the membership and at meetings, but a membership	on Policy meeting in February) ut are your responsibility! application and payment of review by the Flying Crop	
Read an	nd Understood	(Applicant Sig	nature):			Da	te:	
		•	•		•	•	e annual dues amount (\$6.25	

Month	Dues	Month	Dues	Month	Dues
January	\$75.00	May	\$75.00	September	\$25.00
February	\$75.00	June	\$75.00	October	\$18.75
March	\$75.00	July	\$37.50	November	\$12.50
April	\$75.00	August	\$31.25	December	\$6.25