



**APPLICATION FOR MEMBERSHIP**

TITLE.....SURNAME..... FORENAMES.....  
 ADDRESS.....  
 .....POSTCODE.....  
 TELEPHONE (Home).....(Work)..... (Mobile).....  
 (Fax)..... E-MAIL ADDRESS.....  
 OCCUPATION.....DATE OF BIRTH..... **UNDER 73?** YES / NO  
 NAME AND ADDRESS OF NEXT OF KIN.....  
 .....POSTCODE.....  
 RELATIONSHIP.....TELEPHONE.....

1. Are you, or have you been, a member of any other club, including any other flying club? YES/NO  
 1a. If 'Yes', please give names.....
2. Do you know any members of this club? YES/NO  
 2 a. If 'Yes', please give names.....
3. I agree to read and abide by the club rules. YES/NO
4. Have you been a member of this club or the Shropshire Flying Group before? YES/NO
5. In what voluntary capacity are you prepared to assist in the running of the club?.....
6. How did you hear about us?.....
7. Types of Licence or Qualifications held if any: STUDENT / PPL / PPL(H) / NPPL / CPL / ATPL / GLIDING
8. Do you hold? R/T LICENCE YES/NO IMC RATING YES/NO  
 NIGHT RATING YES/NO INSTRUMENT RATING YES/NO
9. TOTAL HOURS: DUAL..... PI.....  
 NIGHT..... INSTRUMENT.....

I hereby apply for membership of the SHROPSHIRE AERO CLUB in the following category: PILOT MEMBER / ASSOCIATE / TEMPORARY PILOT.

I declare that in consideration of my being admitted to membership, I will at all times abide by the club rules, aerodrome and flying regulations and with any other rules, regulations, orders or bylaws which the committee of management may promulgate from time to time. **I understand that all applications are notified to West Mercia Police under the Prevention of Terrorism Act 2000**

I understand that SHROPSHIRE AERO CLUB is the name in which SHROPSHIRE AERO CLUB LIMITED trades.

I wish to become a member of the SHROPSHIRE AERO CLUB LIMITED (a company limited by guarantee and not having a share capital) and I request that my name be entered in the register of members. I undertake to contribute in the event of the company being wound up while I am a member, or within one year of ceasing to be a member, for payment of the debts and liability of the SHROPSHIRE AERO CLUB LIMITED, such amount as may be required not exceeding five pounds (£5).

Dated ..... Signed:.....

In the presence of: (Signature of Witness):.....

**TO BE COMPLETED BY THE PARENT OR GUARDIAN OF APPLICANTS UNDER THE AGE OF EIGHTEEN YEARS**

I, .....  
 Of.....

Hereby declare that I am the parent/guardian\* of the applicant and I further declare that the application is made with my full consent and I agree to accept responsibility for any debts incurred.

Dated ..... Signed:.....

In the presence of: (Signature of Witness)..... \* *delete as appropriate*

<b>OFFICE USE ONLY</b>	<b>MEMBERSHIP COMMITTEE</b>
10. Licence No..... Licence Exp.....	Proposed by.....
11. Medical Exp..... 12. Cert of Revalidation Exp.....	Seconded by.....
13. Checked By..... .Date.....	Chairman's Signature.....