



APPLICATION FOR MEMBERSHIP ALVIN R/C MODEL AIRPLANE ASSOCIATION

DUES SINGLE & FAMILY \$150 PER YR., JR. \$24/YR. PAYABLE IN MAY

P. O. BOX 30, ALVIN, TX 77512

Type of Membership Single ____ Family ____ Jr. ____

First Name For Tag Last Name

AMA Number IMAA Number (if applicable) How Long in RC

Birth date Occupation Email Address

Family Member Age AMA No. Family Member Age AMA No.

Mailing Address Work Phone Home Phone

City State Zip

Emergency Contact Relationship Phone

How did you find us? Friend ____ Hobby Shop ____ Website ____ AMA ____

Reasons for Joining Alvin RC Club: _____

Types of Competition you are interested in: _____

I have read and will abide by all rules and regulations as adopted by the Alvin RC Club (Current Rules Attached):

Applicant's Signature Date

Family Member Signature (if app.) Date

Family Member Signature (if app.) Date

Club Officer's Signature Date