Membership Application Form Flying Season 2024



Date of Applica	tion:				
Name:					
Street Address:	:				
Apartment Num	nber (if applic	cable):			
City:			State:	Zip:	
Date of Birth					
Phone Number	(s):				
Email Address:					
AMA #: (Current Membership is required for Applicatio					
Radio Frequencies		/		/	
Interest (Circle all that apply): Power Glider Helicopter Other					
How did you he	ar about our	club?			
New Dues as of February 1, 2024:					
Family	Adult	Senior Citizen	Junior	Senior	Associate
		(65 and older)	(under 15)	(15 to 18)	(non-flying)
\$91.00	\$70.00	\$49.00	\$14.00	\$35.00	\$23.00

Bring this application, payment and proof of AMA Membership to a club meeting for annual renewal. An Open AMA Membership is required to fly at the Skyhawks field.

If you are unable to pay at a club meeting, send this application, payment and proof of AMA membership (photocopy of card) to the following address:

Cedar Rapids Skyhawks 6811 Surrey Drive NE Cedar Rapids, IA 52402

See you at the field......