
THIS FORM CONTINUES ON THE REVERSE SIDE OF THIS PAGE

FAILURE TO SIGN THE STATEMENT BELOW OR FALSIFICATION OF THIS APPLICATION IS JUST CAUSE FOR REJECTION OF APPLICANT OR TERMINATION OF PRESENT MEMBERSHIP.

THIS APPLICATION IS BINDING AS STATED IN THE OPERATING RULES.

I, _____, CERTIFY THAT THE STATEMENTS ABOVE ON THIS APPLICATION ARE CORRECT AND HAVING READ ALL OF THE OPERATION RULES OF THE FLYING SCOTCHMAN, INC., I HEREBY UNDERSTAND AND AGREE TO ABIDE BY ALL THE OPERATION RULES AND REQUEST MEMBERSHIP INTO THIS CLUB ON THIS DATE:

MONTH: _____ DAY: _____ YEAR _____

AMOUNT OF MONEY SUBMITTED WITH THIS APPLICATION

CHECKMARK IF PAID AND HOW MUCH:

CLUB MEMBERSHIP: \$50.00 _____

CLUB DUES: \$20.00 PER MONTH _____

FUEL TESTER: _____

AVIATION CHARTS: _____

PILOT TRAINING KIT: _____

ADDITIONAL BOOKS OR COUNTER ITEMS: _____

ANY OTHER ADDITIONAL ITEMS: _____

TYPE OF PAYMENT:

CHECK # _____ CASH AMOUNT: \$ _____ CREDIT CARD:

VISA: _____ MASTERCARD: _____ CREDIT CARD#: _____

EXP. DATE: _____

TOTAL AMOUNT SUBMITTED WITH THIS APPLICATION: \$ _____

SIGNATURE OF CLUB OFFICER ACCEPTING THIS APPLICATION AND TITLE OF OFFICE HELD: _____

READ IF UNDER 18 YEARS OF AGE:

**PARENT OR GUARDIAN'S SIGNATURE APPROVING MINOR'S APPLICATION AND
ACCEPTING FINANCIAL RESPONSIBILITY FOR MINOR'S MEMBERSHIP.
*SIGNATURE MUST BE NOTARIZED BEFORE THE MINOR'S APPLICATION WILL BE
ACCEPTED.***
