



High Desert Flyers

Chapter 1345 Bend, Oregon

Membership Form

New Member Details:

First Name:		Last Name:	
Mailing Address:			
City:		State:	Zip Code:
EAA Membership #:			
Email:			
Cell Phone Number:		Telephone Number:	
Projects (if any)			

Family Members: (complete if joining as Family Membership)

First Name:	Last Name:
Relationship:	Birthdate:
First Name:	Last Name:
Relationship:	Birthdate:
First Name:	Last Name:
Relationship:	Birthdate:

Calendar Year Dues:

\$25.00	Individual Membership; Full Year	Notes: <ul style="list-style-type: none"> Family Membership gives you the same access as the Individual membership, and gives membership access to your spouse/children. Dependents must be under the age of 18 to be part of a family membership; must be a Family Member of national EAA for this option. Partial Year applies if you join Chapter 1345 after July 1
\$10.00	Individual Membership; Partial Year	
\$40.00	Family Membership; Full Year	
\$20.00	Family Membership; Partial Year	
Make checks payable to: EAA Chapter 1345 Mail to: High Desert Flyers Chapter 1345, PO Box 6732, Bend, OR 97706		