

Membership Application

EAA Chapter 613



Date: _____

Name: _____ Spouse or S.O. _____

Mailing Address: _____

City/Town: _____ Zip: _____

Business or Occupation: _____ Phone Number: _____

Are you a member of EAA National? Yes: ___ No: ___ National EAA Number: _____

E-Mail Address: _____

Do have a pilot's license? Yes: ___ No: ___ If yes, what ratings do you have? _____

Aircraft Owned: _____ Current Projects: _____

Are you interested in participating in our Young Eagles Program? Yes: ___ No: ___

Aircraft Interests:

Homebuilts: ___ Classics: ___ Warbirds: ___ Ultralights: ___ Aerobatic: ___ General: ___

Other (please describe): _____

Please use this area to express your thoughts and suggestions for club activities, your interests in holding office, or chairing a committee, as needed:

Annual Chapter Dues: Single: \$25 / year, Family: \$30 / year. (please circle the amount you're enclosing).

Make your membership check out to: **EAA Chapter 613** and mail your check and application to:

George Coy, Treasurer

116 St. Albans Road

Swanton, VT 05488

Thank you for joining our EAA Chapter. We look forward to seeing you soon!