

EAA Chapter 654 Membership Form

Mail Completed Form and Payment to:

EAA Chapter 654
PO Box 101
Montague, CA 96064

Chapter Use Only:

Date Paid: _____

☐ Cash ☐ Check

Annual Membership Dues: **\$20.00** – Due January 1 - **Make Check Payable to “EAA Chapter 654”**

☐ **NEW Member**

EAA Number: _____ (if you are new)

☐ **Membership RENEWAL**

EAA Expiration Date: _____ (if you are new)

NAME _____ SPOUSE/SIGNIFICANT OTHER _____

ADDRESS _____ PHONE _____

CITY _____, STATE _____ ZIP _____ EMAIL _____

I ☐ consent ☐ do not consent to receiving Chapter Communications by email.

AIRCRAFT INFORMATION

Make/Model _____ Status (flying/building/restoring/etc) _____ Based At _____

PILOT INFORMATION

☐ Student Pilot ☐ Licensed Pilot ☐ Flight Instructor ☐ A&P/IA

AREAS OF INTEREST

☐ Flying Activities ☐ Dinners/Barbeques ☐ Other Social Activities

☐ Chapter Leadership (Board/Officer) ☐ Builder Support

☐ Young Eagles (Organization, Pilot, Crew) ☐ Other Interest _____

☐ Chapter Newsletter / Website / Social Media ☐ Other Interest _____

Additional Comments and/or Suggestions:

Signature: _____ Date: _____