## SPRING HOLLOW R/C FLYERS (SHRCF)

MEMBERSHIP APPLICATION	N for the Year	of: <u>2026</u>	
Personal Information			
Full Name: Address: City: Phone: Date of Birth: E-Mail:	StateAM/		Zip Code:
Have you ever flown an R/C Aircr	aft solo? Yes: □ No	o: 🗆	
What radio systems do you current List other Clubs you have belonge		z and/or □ 72	2 MHz, Channels
flight checked by a designated pilot beformation and Safety Program sponsored Desiring to be legally bound by this agree codes established by the AMA and Spring all consequences associated with memborishing and the flying site property owner membership or flying activities in the clu	bre flying solo at the field by the club. Deement, I, the applicant and Hollow R/C Flyers (to Dership in the SPRING Ders against any liability, b.	d. All student pi , agree that I ha he "club"). I und HOLLOW R/C I claim, or dama	of Spring Hollow R/C Flyers. All members MUST is ilots must complete the SHRCFlyers Flight ave read and will comply with the flying site safety derstand that I am solely responsible for any and FLYERS and agree to hold harmless the club, its ages to any person or property as a result of my all grace period to February 28th. An application
must be completed for each member.	idary 1 to December 3	i, with a reflew	al grace period to replication
			ub's bylaws <mark>and you remain an</mark> active member of ersonal Information you have listed above.
Applicant's Signature:Sponsor:			Date Signed:
Membership Fee – enter the app	propriate amount(s)	* in the box b	pelow.
Check member type	Adult*		Family
☐ First time ☐ Renewing			**
* Full Adult members: \$40/year - no discounts or re	eductions for later in the yea	r. According to our b	by-laws a person is an adult if they are 19 or over on July 19t

## Instructions:

same as AMA.

Complete this Application form and mail it to: Doug Schmidt – Treas/Secretary, 99 Clover Hill Ln., Spring City, PA 19475 with a:

\* Family membership: \$40/year - no discounts or reductions for late in the year. This includes family members under 19 on July 19th.

- Photocopy of your Current Year AMA Membership Card and your FAA UAS Registration card
- Check for the Total Amount Due, payable to: Spring Hollow R/C Flyers
- A self-addressed and stamped envelope with first class postage for return of your membership card.

For questions call Doug Schmidt at: 908-616-3637.