



**APPLICATION FORM**

Name: .....  
 Address: .....  
 .....  
 Post Code: .....  
 Date of Birth\*: ...../...../.....

*\*If Under 18, Parent or Guardians Details:*  
 Name: .....  
 Address: (if different):  
 .....  
 .....  
 ..... Post code: .....  
 Tel: ..... Mobile: .....  
 Parent/Guardians Signature: .....

Tel: ..... Mobile: ..... E-mail: .....@.....

Application Type: Adult / Family / Spouse / Non-flying / Junior Circle as appropriate

Please indicate discipline of interest. (Please ) Fixed Wing (  ) Helicopter (  )

Current Certification: ..... (e.g. SAA Bronze, BMFA A)

Insurance details if already practising:

Type: ..... Expiry: ...../...../..... Number: ..... (If applicable)

Radio Equipment Details:

Main Frequency/Channel	Secondary Frequencies/Channel
	/ / / / /

Other Model Club Memberships:

1) ..... 2) ..... 3) .....

Are you willing to assist in the maintenance of the club facilities? Yes/No

Do you agree to abide by the club safety regulations? Yes/No

Have you been a member of the club before? Yes/No

Signed: ..... Date: ...../...../.....

**For official use only**

Application type: New / Re-Application

Signed..... Date .... /.../.... Office: .....

Signed..... Date .... /.../.... Office: .....

On Behalf of the committee: Application: Accepted/Rejected

- ❖ Please bring application to any club night to apply
- ❖ \*Note all junior members or Vulnerable Adults must be accompanied by their parent or guardian to all club activities. Or by an appropriate responsible adult nominated by their parent/guardian.