

Application / Renewal Form for the Circle City Flyers, Inc.

One form per applicant

AMA Number _____ Email Address _____

Last Name _____ First Name _____ Initial _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Birth Date _____ I would ___ would not ___ be willing to read the newsletter online.

I have read, and received a copy of, and agree to be bound by, the By-Laws and Safety Code of the Academy of Model Aeronautics (AMA). Applicant agrees to be bound by any additions and/or modifications to the above referenced documents as published in the CCF newsletter and/or posted on the bulletin board at Deleo Field

X _____
Signature of Applicant _____ Date _____

X _____
Signature of Parent or Guardian if Applicant is under 18 years of age _____ Date _____

Return application to P.O. Box 6307, Corona, CA 92878 with proof of current AMA Membership and remittance.

Initiation Fee:

New Members Only \$60.00
(waived for junior members)

Annual Dues:

Junior Membership \$1.00

Full Membership \$40.00
(new members see prorate below)

Family Membership \$60.00
(see by-laws)

Total Enclosed \$ _____

New full memberships are reduced by \$10 quarterly. Fourth quarter dues are \$60 which includes dues for the following year.

**Proof of current AMA membership
MUST accompany this application**