

2020 Centaur R/C Club Application

Mail to: Centaur R/C Club, P.O. Box 261 Lisbon, OH 44432

- Please make check / money order payable to "Columbiana County Centaur R/C Club".

Name _____ Birth Date _____
Address _____ Email Address _____
City _____ State _____ Zip code _____
Phone # _ (____) _____ AMA# _____ FAA# _____

Please select membership type: (any /all that apply)

<input type="checkbox"/>	\$50 Individual Membership (Adult membership)
<input type="checkbox"/>	w/\$25 Late fee (If submitting after March 31 st)
<input type="checkbox"/>	\$75 Family Membership (Includes up to 4 immediate family members of the same household. All applicants must submit their own application with personal information)
<input type="checkbox"/>	\$25 Junior Membership (Anyone under 18 yrs old not covered by family membership)
<input type="checkbox"/>	\$25 Associate Membership (Entitles one to all club privileges except flying)
<input type="checkbox"/>	\$0 Family Member (Personal data to accompany Family Membership application)

- ✓ All flying members must have current A.M.A. coverage for a club membership card to be issued.
- ✓ Please see our website (www.centaur-rc.org) for club information, club rules and events.
- ✓ An application late fee applies to renewing members returning applications after March 31st.
- ✓ ALL "Family Members" who will be flying must have their own A.M.A. coverage and number.
- ✓ Any pilots using older radio technology such as A.M., F.M., P.C.M., frequencies must use the available frequency control board.
- ✓ We would like to welcome all new members to the Centaur R/C Club and wish you a year of enjoyment and fun!

By signing this application, I agree to abide by **ALL** A.M.A. guidelines, club rules and procedures which are available at the club field house, on the club website as well as application pickup locations. Failure to do so may result in my membership and privileges being revoked.

Signature _____ Date _____

Payment amount included with application: _\$_____._____

MW20