## **Eagle Sport Aviation Club Junior Membership Application**

Please visit <a href="http://www.eaglesport.org">http://www.eaglesport.org</a> for the bylaws and more information

Please type or print information clearly

1. Name; Last:	First:	
2. Address (Local):		
3. City:	State:	_ZIP:
4. Phone Number; Local:	Cell:	
5. Email Address:		
*Preferably <b>NO @erau.edu</b> addresses, ERAU has		
6. DOB:	Age at Time of Application:	
7. Parent/Guardian; Name:		
*Above must be a legal parent or guardian of ap	plicant and over the age of 21.	
8. Parent/Guardian; Phone 1:	Phone 2:	
9. How did you first hear about the club?		
<ul> <li>membership fee in order to remain within the office the second of the second</li></ul>	r member in order to receive flig SA at all times when flying an ES cedures set forth in the Eagles Sp w.eaglesport.org). ded within the bylaws. s outside of the rules and proced s, and other club related charges	AC Inc. asset. port Aviation Club dure in the bylaws. s at the time they are due.
Sign Name:	Date:	
<ul> <li>As the parent or guardian of this applicant, I         <ul> <li>The applicants' membership will expire on the longer have club privileges unless rejoining the</li> <li>Policies and fees are subject to change as provided to the Eagle Sport Aviation club is neither response as a result of inappropriate member actions or action in question, I am responsible for all legal</li> <li>I give full consent for the applicant to conduct Sunior Membership.</li> </ul> </li> </ul>	day of his/her 18 <sup>th</sup> birthday at w club as a collegiate or senior m ded within the bylaws. sible nor liable for any personal obi-law violation. If the applicant and financial penalties' resulting	or property damage and injury tis found to be at fault of the g from the action.
Sign Name:	Date:	
	fice Use Only n Date: 05-14-09	
Start Date: Access Entry Date:	Secretary:	
DOB: Junior Members	hip Expiration Date:	