

Membership Application

EAA Chapter 613



Date: _____

Name: _____ Spouse or S.O. _____

Mailing Address: _____

City/Town: _____ Zip: _____

Business or Occupation: _____ Phone Number: _____

Are you a member of EAA National?: Yes: ___ No: ___ National EAA Number: _____

E-Mail Address: _____

Do have a pilot's license? Yes: ___ No: ___ If yes, what ratings do you have? _____

Aircraft Owned: _____ Current Projects: _____

Are you interested in participating in our Young Eagles Program? Yes: ___ No: ___

Aircraft Interests:

Homebuilts: ___ Classics: ___ Warbirds: ___ Ultralights: ___ Aerobatic: ___ General: ___

Other (please describe): _____

Please use this area to express your thoughts and suggestions for club activities, your interests in holding office, or chairing a committee, as needed:

Annual Chapter Dues: Single: \$20 / year, Family: \$25 / year. Please make your membership check out to: **EAA Chapter 613**. Please mail your check and application to:

Marge Butterfield, Secretary

721 No. Williston Rd.

Williston, VT, 05495

Thank you for joining our EAA Chapter. We look forward to seeing you soon!