

Consair Flyers Club, Inc.
Membership and Credit Application

Personal Data

Name: _____

Address: _____

Apt: _____

City: _____ St: _____ Zip: _____

Phone: (_____) _____

Drivers Lic. # _____

Birthdate: ____/____/____ Email: _____

Piloting Experience

Cert.# _____ Type: _____

Total Hrs: _____ PIC: _____ Inst: _____ Dual: _____

Cmplx _____ ME _____ Other _____

Other Clubs: _____

Referred By: _____

Financial Information

Bank Name: _____

Checking Acct#: _____

Other Credit: _____

Acct #: _____

Amount of Credit: _____

Club Use

Briefed By: _____

Approved: _____

Approved: _____

Employment

Company: _____

Address: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: (_____) _____

Occupation _____

How Long?: _____

_____ **Check here if you are a Student Pilot**

Ratings: _____

BFR: ____/____/____ Med: ____/____/____ Class ____

Your CFI: _____

FAR Violations: _____

Emergency Contact

Name: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: (_____) _____

Relation: _____

Fees

Init (\$30): _____ Key (\$20): _____ Chk#: _____

Rcd By: _____ Date: ____/____/____

Mbr# Assigned: _____ Date: ____/____/____

Sched Login: _____ PIN _____

I agree to abide by the By-laws, Operation and Financial Policies and regulations set forth by the Consair Flyers Club, Inc. and by all local and Federal laws and regulations. I agree to pay all debts (money) owed to the Consair Flyers Club, Inc. for membership, dues, flight time costs, books materials, or other costs including collection and attorney's costs that I incur while a member of the Consair Flyers Club, Inc..

I certify that all information is true to the best of my knowledge and I understand that any falsification shall be grounds for disqualification or forfeiture of membership. I authorize Consair Flyers Club, Inc. to perform a confidential credit check.

Signature: _____ Date: _____