

Application for Global Aviation Flying Club Membership

Date: _____ Occupation _____

Last Name _____ First Name _____

Address _____

Home phone (____) _____ Cell or Business phone (____) _____

Email address _____ DOB _____

Drivers License# _____ Country of Citizenship _____

In case of Emergency, please contact _____

How did you here about Global Aviation? _____

Membership Type # Full _____ Non-flying _____

Pilot Certificate Held _____

Pilot Certificate# _____ Date Issued _____

Ratings on Pilot Certificate ASE AMEL INSTRUMENT OTHER _____

Flight Hours Total _____ Multi-Engine _____ Retractable _____

Last 90 days _____

Medical Class _____ Date _____

Date of last Fight Review per 14CFR 61.56 _____ Paragraph c, d, e, or f _____

Any violations, waivers or accidents (YES/NO)

If yes, please explain below

Applicant has read and agrees to be bound by the Club Rules and Regulations set forth by the Club. Club dues will be automatically billed (monthly, quarterly, bi-annual, and yearly) to your credit card per your request. Applicant agrees to pay a non refundable initiation fee upon signing this document.

Initiation Fee: \$ _____

Monthly Membership Fee \$ _____

Billed to Credit Card \$ _____

Card number _____ Exp _____ CCV _____

Applicant Signature _____ ***Date*** _____

For Office Use Only

Scheduling

Instructions emailed

Credit Card List

Quickbooks