

VALLEY SOARING CLUB INC
RANDALL AIRPORT
MIDDLETOWN, NY



NAME: _____
last first middle initial

ADDRESS: _____

CITY: _____ STATE _____ ZIP: _____

HOME PHONE: () _____ WORK PHONE: () _____

CELL PHONE: () _____ E-MAIL: _____

DATE OF BIRTH: _____ U.S. CITIZEN (yes or no) _____

GLIDER PILOT CERTIFICATES HELD: STUDENT _____ PVT _____ COMM _____ CFI-G _____

OTHER PILOT CERTIFICATES HELD: _____

CERTIFICATE NUMBER: _____

TOTAL NUMBER OF HOURS: _____ GLIDER HOURS: _____

TAIL WHEEL AIRPLANE HOURS: _____ DATE OF LAST BFR: _____

- Are you currently a member of the Soaring Society of America? _____ SSA Membership # _____
Do you hold a current FAA Medical Certificate? (class or none) _____
Do you hold a Foreign certificate? (yes or no) _____
Do you have any known physical defect that would prevent you from piloting a glider?(yes or no) _____
Have you ever had a FAA certificate suspended or revoked? (yes or no) _____
Have you ever been denied a FAA Medical Certificate? (yes or no) _____

IF YOU ANSWERED YES TO ANY OF THE ABOVE FOUR QUESTIONS, EXPLAIN ON THE REVERSE SIDE OF THIS FORM

ALL MEMBERS MUST ALSO BE MEMBERS OF THE SOARING SOCIETY OF AMERICA

I agree to abide by the bylaws and rules of the Valley Soaring Club Inc., and participate in the membership role of assigned duties and responsibilities as set forth by the Board of Directors. I understand my membership may be revoked for any violation of the bylaws or rules of the Valley Soaring Club Inc., or for any reason as seen fit by the Board of Directors. I also understand that I must be a member in good standing of the Soaring Society of America to exercise my privileges in the Valley Soaring Club Inc.

Signed: _____ DATE: _____

Membership Type: (Full - \$300, Family - \$150, Junior - \$50, Associate - \$50) _____

SSA Membership dues must be paid upon joining club. (Full \$64, Junior - \$36) _____

Membership initiation fees and SSA dues must be paid in full prior to acceptance into this club.

Applicants under the age of 18 must have a parent or guardian sign this form prior to possible acceptance into this club. I understand and accept all financial responsibilities of the Club for the above applicant.

X _____ Relationship _____