



# FAA FLYING CLUB (ACY)

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## Membership Application

Please complete this form and forward to Matthew McCann, ANG-E54, FAA Tech Center, Building 300, Column L-29 along with

- 1) Copy of your pilot and medical certificates (if you possess them)
- 2) A check for \$350 for the initiation fee (\$300) and first month's dues (\$50)

Name: \_\_\_\_\_

Routing Symbol: \_\_\_\_\_

Company Name (if contractor): \_\_\_\_\_

Work Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Number: \_\_\_\_\_

Fill out the following if applicable:

Total Flight Time: \_\_\_\_\_

Time Last 12 Months: \_\_\_\_\_

Ratings: \_\_\_\_\_

Medical Certificate Type: \_\_\_\_\_

Medical Date: \_\_\_\_\_

Date of last flight review: \_\_\_\_\_

Brief statement of any accidents/suspensions and date(s):  
\_\_\_\_\_

Desired membership date: \_\_\_\_\_

This is a formal application to join the FAA Flying Club, Inc. I have read and will follow the Constitution, By-Laws, and operating rules of the Club.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_