Mishawaka Pilots Club Membership Application

Full Name:	Date:	
Address:		
City:	State: Zip Code:	
Phone:	Mobile Home Work	
Email:		
Emergency Contact:	Phone:	
Sponsoring Member:		
Are you looking for flight training: Yes No Current Hours if applicable:		
Are you looking for additional ratings: Yes No Ratings you are interested in:		
For Current Pilots and Aircraft Owners		
Pilot Certificate #:	Ratings:	
Aircraft Type:	N-Number:	
Do you need a fuel card: Yes No Are you interested in a hangar: Yes No		
Do you have a current medical: \Box Yes \Box No Class:		

Upon acceptance by the membership: I hereby agree to abide by the rules of the Mishawaka Pilot's Club, and to make timely payments of financial liabilities owed to the Club. I understand this is a flying club, and volunteerism is needed to keep the membership costs as low as possible, and will do my part

Applicant signature:	
Date of acceptance:	
Officer signature:	