

**WHITE HILLS EAGLES R. C. CLUB, INC.**  
**AMA Charter Club # 4567**  
**APPLICATION FOR CLUB MEMBERSHIP**

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ AMA Number: \_\_\_\_\_ Type \_\_\_\_\_

Telephone Numbers: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Radio Frequencies currently using: \_\_\_\_\_

Other Clubs currently a member of: \_\_\_\_\_

THE FOLLOWING IS THE CLUBS Safety Code and By Law Compliance statement:

"I agree to comply with the AMA Safety Code for all applicable model aircraft operations and will comply with the By Laws of White Hills Eagles R. C. Club. Inc."

Applicant Signature : \_\_\_\_\_ Date \_\_\_\_\_

Sponsor Signature : \_\_\_\_\_ Date \_\_\_\_\_

The Sponsor is required to verify information about the applicant such as AMA membership, etc. The Sponsor then presents this application to the Membership Committee. (The Membership Committee consists of four, Chairmen and three club members in good standing.) The Membership Committee has sole authority to approve or reject the applicant.

Membership Committee Approval Signature: \_\_\_\_\_ Date \_\_\_\_\_

Membership Committee Rejected Signature: \_\_\_\_\_ Date \_\_\_\_\_

Application Fee of \$25.00, nonrefundable, must be submitted with this application. Attach check # \_\_\_\_\_ payable to White Hills Eagles R. C. Club, Inc.

The Applicant may mail or deliver application to:

Mike Bellofiore, Membership Chairman  
(membership@whitehillseaglesrc.org)  
149 Palomino Pass, Trumbull, Connecticut 06611-3276