



HAWKESBURY MODEL AIR SPORTS Inc.

Membership Form

Please complete **all details**:

New Members return form to the President/ Secretary, renewing Members return form to the Treasurer.

Surname: _____ First Name: _____

Address: _____

_____ Post Code: _____

Date of Birth: ____ / ____ / _____

Emergency Contact Name: _____ Emergency Contact Number: _____

Home Phone: _____ Mobile Phone: _____

Email Address: _____

Remember if you change your email address it is your responsibility to notify the Secretary or Treasurer of your Club.

Membership Type:

- Senior
- Junior
- Life - (Pay only the MAAA & MAS fees applicable if flying.)
- Associate - (Must provide proof of membership from other club.)

MAAA #

AUS -

(If you're a new member write "NEW")

MAAA Qualifications:

	Fixed Wing	Glider	Helicopter	Multi Rotor
Instructor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Giant Scale	Large Scale	Turbine	
Inspector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Referring Club/HMAS Contact: _____

I hereby state that I will abide by the rules of the MAAA, Aeromodellers NSW and those of Hawkesbury Model Air Sports Inc.

Signed: _____ Date: ____ / ____ / _____

PRIVACY : The Club respects your privacy so if you wish your contact details not to be given to anyone but Committee Members, please tick this box.

Office use only:

Received: _____ Receipt Number: _____ ANSW Pd: _____