



## Maui R.C. Modelers

P. O. Box 715  
Pu'unene, HI 96784  
[www.mauirc.com](http://www.mauirc.com)

### Membership Application

Please check the type of Membership:

- |                          |   |              |
|--------------------------|---|--------------|
| <input type="checkbox"/> | Full Membership (AMA required)                      | \$100 / year |
| <input type="checkbox"/> | Full Membership (AMA Required) - students, military | free         |
| <input type="checkbox"/> | Full Membership - no flying privileges              | \$25 / year  |

Please fill out your current address information:

Name	<input type="text"/>		
	First Name	Last Name	
Address	<input type="text"/>		
	Street / P.O. Box		
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	City	ZIP	State
E-Mail	<input type="text"/>		
Phone	<input type="text"/>		
	Mobile Number	Home Number	

What is your experience level:  Experienced Flyer  Novice (assistance required)

Please attach a copy of your AMA Card valid for the current year or

Verification of  AMA by:  AMA   
Number:

I will abide by the AMA Safety Code, the MRM Constitution, bylaws and regulations. I will keep myself apprised of published changes to the preceding.

I am willing to serve on at least one of the following but prefer the one(s) marked:

- |  |  |                                       |  |
|--|--|---------------------------------------|--|
| <input type="checkbox"/> Flying Events | <input type="checkbox"/> Club Officer      | <input type="checkbox"/> Air Shows    | <input type="checkbox"/> Field Maintenance |
| <input type="checkbox"/> Newsletter    | <input type="checkbox"/> Flight Instructor | <input type="checkbox"/> Photographer | <input type="checkbox"/> Phone Committee   |
| <input type="checkbox"/> Historian     |  |                                       |  |

Signature  Date