

Skyknights Radio Control Club of Portland
Application for Membership

Please **print** using black or blue ink.

Name: _____ Spouse: _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Work Phone: _____

AMA Number: _____ Fax Number: _____

Birth date: _____ E-Mail Address: _____

Cell Phone: _____

“I agree to abide by the Academy of Model Aeronautics (AMA) Safety Code and by the Skyknights Radio Control Club of Portland Field and Safety Rules. I am an AMA member and will maintain current membership status.”

Annual Club Dues and Field Assessment of \$90.00

Under 18 Yrs. of age and a full-time student in school use the Youth Application for Membership.

(DATE)

(SIGNATURE)

Make checks payable to SKYKNIGHTS, and bring to a club meeting or mail, along with a copy of your AMA card, to:

Ken Manske
3951 SE El Camino Dr.
Gresham, OR 97080
503-666-4220
ken@nwartmall.com

Note: Our fiscal year runs from April to April. Therefore your second year's dues will be due next April and will be prorated according to the month you join.

Welcome
Training
Badge
Card

Sponsored by : _____ Dated : _____