

**Cowtown Flying Club
Membership Application**
Date Applying for Membership _____

Name: _____ Birthdate: _____
 Street: _____ Work Phone: _____
 City: _____ Home Phone: _____
 State: _____ Zip: _____ Cell Phone: _____
 Email Address: _____ May we contact you via text? Y / N
 List Citizenship: _____ (Please include a copy of your Government issued ID.)

For Pilots, please check all of the following:

License: ATP Commercial Private Student
 Rating: Instrument CFI CFII MEI Other
 FAA Medical Date (Mo/Yr): _____ Last BFR Date (Mo/Yr): _____

FLIGHT HOURS	ASEL	RETRACT	MULTI-ENGINE	OTHER
TOTAL HOURS				
PIC HOURS				
HOURS LAST YEAR				

Have you ever had an airplane accident or been cited for a violation of Federal Aviation Regulations?
 Yes No (If yes, please attach an explanation.)

If endorsed by a current club member, please list his/her name: _____

How did you hear about the Cowtown Flying Club?

Internet Current Member Other Please explain: _____

List two personal character references:

Name: _____	Name: _____
Day Number: _____	Day Number: _____
Night Number: _____	Night Number: _____
Address: _____	Address: _____
How do you know this person? _____	How do you know this person? _____

I declare that the above information is true and that I will abide by the By-Laws and Standard Operating Procedures of the CFC. I realize that failure to pay for any goods or services at the time payment is requested will delay or deny participation with this Club. I further understand that the Board OR President may revoke my membership any time within the first 60 days of Club Induction, without regard to usual Club procedures. Furthermore, I understand the Cowtown Flying Club maintains its right to legally pursue me for outstanding debts owed to the club. If required I hereby authorize the CFC to check my credit rating.

Signature: _____ Date: _____

A guarantor is required for applicants less than 18 years of age in the State of Texas.

Name: _____ Birthdate: _____
 Street: _____ Work Phone: _____
 City: _____ Home Phone: _____
 State: _____ Zip: _____ Cell Phone: _____
 Email Address: _____

I declare/affirm that I will be responsible for payment of the above-named applicant's annual dues and aircraft rental and any damage to same, including, but not limited to late payment fees and other charges as may be incurred. I understand that the member is responsible for formal payment according to CFC procedures which includes aircraft refueling. I realize that failure to pay for any goods or services at the time payment is requested will subject the member to immediate suspension and/or revocation of their membership. Furthermore, I understand the Cowtown Flying Club, Inc. maintains its right to legally pursue me in the local jurisdiction of the club's choice, for debts owed to the club.

Signature: _____ Date: _____

Application and proof of identification should be mailed to the Secretary. Allow up to two weeks for processing.

FOR CLUSE USE ONLY

Date received application: _____ Officer Board Review Date: _____
 _____ Passed _____ Rejected Date Contacted: _____