

Wing and Rotor Model Flying Club

2024 Membership/Guest Application

All flying members/guests of the club must:

- be a member of the Academy of Model Aeronautics (AMA)
- have Federal Aviation Administration (FAA) registered aircraft displaying their FAA sUAS#
- have passed The Recreational UAS Safety Test (TRUST).

Please indicate membership type with a ‘v’

| Membership Type | Description | Cost |
|------------------|---|------------|
| Full Membership | Flying Member | \$40/year |
| Family Member | Flying Member (for each additional family member) | \$20/year |
| Junior Member | Flying Member (under 18 years of age) | \$20/year |
| Senior Member | Flying Member (over 65 years of age) | \$20/year |
| Associate Member | Non-flying Member (AMA/FAA/Trust not required) | \$15/ year |
| Guest Pilot | Non-Member. Courtesy flying field privileges for the day only | No charge |

* **New, First-time**, member applications received after August 1st provide membership through the following year.

Pilot Information

| | | | |
|---------------------------------------|--|------------------------|--|
| Name | | | |
| Mailing Address | | | |
| Phone | | | |
| E-Mail | | | |
| Birth Year | | | |
| AMA # | | Expiration Date | |
| FAA sUAS # | | Expiration Date | |
| FAA TRUST Authentication Token | | Issue Date | |

| | | | | |
|----------------|---------------------------------------|--------------------------------------|---------------------------------------|--------------------------------------|
| Skill Level: | <input type="checkbox"/> Builder Only | <input type="checkbox"/> Novice | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced |
| Interested in: | <input type="checkbox"/> Airplanes | <input type="checkbox"/> Helicopters | <input type="checkbox"/> Multi-Rotor | <input type="checkbox"/> Other _____ |

- I agree to comply with AMA, Wing and Rotor, New York State Park’s Department Flying Permit and applicable FAA, FCC, Federal, State, local laws and rules.
- I have read and understand FAA Form 7711-1 Airspace Authorization and will comply.
- I attest that all information on this application is correct to the best of my knowledge.

SIGN HERE: _____ DATE: _____

Please make checks payable to **Wing and Rotor of WNY** and send to:

Rich Anderson
 2101 Harvey Rd
 Grand Island, NY 14072
 E-mail: Rich2101@roadrunner.com

Additional information is available at our website: WingAndRotor.org