



# TUMUT AERO CLUB

All correspondence:  
The Secretary  
PO Box 112  
Tumut NSW 2720

Flying Centre of the Riverina

Telephone: (02) 69471148  
Facsimile: (02) 69471132

## Application for Membership

I, .....  
[full name of applicant]

of .....  
[address]

occupation:..... date of birth:.....

Phone no:..... mobile phone no:.....

email address:.....

hereby apply to become a member of the abovenamed incorporated association. In the event of my admission as a member, I agree to be bound by the constitution of the association for the time being in force.

.....  
Signature of applicant Date

I, .....  
[full name]

a member of the association, nominate the applicant for membership of the association.

.....  
Signature of proposer Date

I, .....  
[full name]

a member of the association, second the nomination of the applicant for membership of the association.

.....  
Signature of seconder Date

### Applicant questionnaire:

Reason for applying for membership:.....  
.....  
.....

Indicate your aviation experience and any ratings, if any:

Flying hours:..... Aircraft type/s:.....

Licence:.....Licence expiry:.....

Endorsements:.....

Membership becomes effective when the nominees name is entered in the register of members. This occurs after the nomination has been approved by the Committee and membership fees have been paid.