

# Kitsap Aviation Squadron Membership Application

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<b>Applicant Information</b>					
<u>Last Name</u>		<u>First Name</u>		<u>Middle</u>	
<b>Physical Address</b>					
<u>Street</u>		<u>City</u>		<u>State</u>	<u>ZIP</u>
<b>Mailing Address</b>					
<u>Street</u>		<u>City</u>		<u>State</u>	<u>ZIP</u>
<u>Home Phone</u>	<u>Work Phone</u>	<u>Cell Phone</u>	<u>Fax</u>	<u>E-Mail Address</u>	
<u>Date of Birth</u>	<u>Eye Color</u>	Male ( ) Female ( )	<u>Height</u>	<u>Weight</u>	Married ( ) Single ( )
<u>Driver's License #</u>		<u>State</u>	<u>Occupation</u>		
<u>Employer</u>			<u>Employer Address &amp; Phone</u>		
<b>Emergency Information</b>					
<u>Name of person to notify in case of emergency</u>				<u>Phone</u>	
<u>Street</u>		<u>City</u>		<u>State</u>	<u>ZIP</u>
<b>Education (check those completed)</b>					
Elementary ( )	High School ( )		College ( )	Trade ( )	Other ( )
<u>Hobbies &amp; special interests</u>					
<b>Military Service</b>					
<u>Active ( )</u>		<u>Reserve ( )</u>		<u>Retired ( )</u>	
<u>Army ( )</u>	<u>Navy ( )</u>	<u>Airforce ( )</u>	<u>Coast Guard ( )</u>	<u>Marines ( )</u>	<u>Other ( )</u>
<b>Pilot's License</b>					
Have License Yes ( ) No ( )	<u>Type</u>	<u>Number</u>	<u>Total time as PIC</u>	<u>Date of last BFR</u>	
<u>Aircraft Model (s)</u>			Approx. Total Hrs. at PIC	Date of Last Flight	
<u>Other Relevant Experience:</u>					

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Medical Certificate					
Have Medical ( ) No ( )	Yes	<u>Class</u>	<u>Date</u>	<u>Number</u>	<u>Examiner's S/N</u>
<u>Disease, disability, handicaps, limitations (if YES, explain below Yes ( ) No ( )</u>					
References					
<u>Personal</u>				<u>Phone</u>	
<u>KAS Member</u>				<u>Phone</u>	
<u>Flight Instructor</u>				<u>Phone</u>	
<u>Other</u>				<u>Phone</u>	
Are you willing to serve as a club office if appointed, elected or as a volunteer? Yes ( ) No ( )					
Have you ever been arrested? (If YES, please explain below) Yes ( ) No ( )					
<u>Applicant's Signature</u>				<u>Date</u>	
Office Use Only					
<u>Date of Board</u>		<u>Option Offered</u>		<u>Accepted Yes ( ) No ( )</u>	
<u>Other actions needed</u>					
<u>President's Signature</u>				<u>Date</u>	

Please send completed form to:
<p><b>Kitsap Aviation Squadron</b>  <b>PO Box 10031</b>  <b>Bainbridge Island, WA 98110</b>  <b>Or e-mail to <a href="mailto:stevej@goeps.com">stevej@goeps.com</a></b></p>