Application for Membership

Alamo Radio Control Society, Inc.

Academy of Model Aeronautics Chartered Club # 603

Full Name (Last, First, Middle Initial)			AMA # (Required)	
Mailing Address	City and Sta	ıte.	Zip Code	
Ivianing Address	City and Sta	ue	Zip Code	
Home Phone	Work Phone	e (Optional)	¹ FCC Lic # (0	Optional)
E-mail Address	Cell Phone	(Optional)	Member type	· Youth
Other Local Area RC Club Membership (Club Name)			Extra	ı
Alamo Radio Control Society Bylaws – S Individuals wanting to become a member AMA Insurance and must be signed by o	of the corpor ne of the elec	ration must provide a mem	The club officer accep	pting the
AMA Insurance and must be signed by o application will also collect initiation fee a the application. No applications for mem	nd prorated d	ues for the year. Funds w	vill be forwarded to th	
Please Read Carefully the Following Star	•	·		
1. I agree to abide by all by-laws and Rul and to obey all the ARCS safety rules.	es of the Alar	no Radio Control Society,	Inc. (Here after refe	erred to as ARCS
2. I agree to maintain a current members to abide by all rules and regulations of the				
3. I agree, if operating in the Amateur Ra the Technician, General, Advanced, or E				erators License
4. I agree to assume all risks with respective resulting from mechanical or electronic fainstructor's part. I understand that any of serious personal injury.	ilure of any n	ature, or "pilot error" on m	y part, or if taking ins	struction, on the
Applicant signature if agrees to statements above:	Date	Witnessed by Club Officer	I	Date