

MEMBERSHIP APPLICATION

Date of Application:	Membership Type: Voting Participating Introductory	
First Name:	Middle Initial: Last Name:	
Street Address:		
	State: Zip:	
Driver's License Number:	State: Birthdate:	
Cell Phone:	Home Phone: Work Phone:	
Primary Email:	2nd Email (optional):	
Employer:	Occupation:	
Employer Phone:	_ Employer Address:	
Emergency Contact Name:	Relationship:	
Emergency Contact Phone:	Alternate Emergency Contact Phone:	
Citizenship: United States	Other:	
MAA Sponsor (optional):		
	Sport Recreational Private Commercial ATP	
Date of Last Flight Review:	Name of CFI:	
Type of Last FAA Medical:	Date of Last FAA Medical:	
If operating under "Basic Med," I	certify that I meet all requirements of the Basic Med rule: Yes No	
Date of Last Basic Med Physical	Exam: Date of Last Medical Education Course:	
Please answer the following que	stions:	
1. Have you ever been issued an	y citations for, or charged with, violating any aircraft- or aviation-related	
laws or regulations?		
Yes No		
2. Have you ever had any action t	aken against your Pilot Certificate?	
Yes No		



3. Have you ever been involved in an aircraft- or aviation-related accident or incident?

Yes No

4. Have you ever submitted an aircraft- or aviation-related claim to an insurance carrier?

Yes No

5. Have you ever been arrested for, charged with, or convicted of a crime that has not been expunged by a court?

Yes No

6. Have you been involved in any motor vehicle accidents within the past three years?

Yes No

7. Have you been issued any citations for, or charged with, violating any traffic laws within the past three years?

Yes No

- 8. Has your driver's license ever been suspended or revoked?
 - Yes No

9. Have you ever been denied automobile-, aircraft-, or aviation-related insurance of any kind?

Yes No

If you answered "Yes" to any of the questions numbered 1 through 9 above, please provide a full and complete explanation of the facts and circumstances surrounding each such incident or event:

Event 1:_____
Event 2:_____
Event 3:

Event 4:

(attach additional pages, if necessary).

If I am accepted as a member of MAA, I understand, acknowledge, and agree that, as a condition of and at all times during such membership, I shall (initial below):

- _____Abide by and fully comply with the Articles of Incorporation of Michiana Air Activities, Inc.
- Abide by and fully comply with the Amended and Restated By-Laws of Michiana Air Activities, Inc.
- Abide by and fully comply with any and all rules, and MAA Policies, and Procedures.
- _____ Abide by and fully comply with any and all applicable laws and regulations.
- Fulfill all financial obligations to MAA, including dues, fees, rental charges, and other charges.



By my signature below, I hereby further (initial below):

- Certify that all information contained in this application is true and correct to the best of my knowledge and that no information material to this application has been withheld.
- Agree that any misrepresentation made by me in this application shall constitute sufficient cause for the rejection of this application and/or termination of my membership in MAA.
- Acknowledge that all information contained in this application is subject to investigation and verification by MAA, and agree to cooperate fully with any such investigation or verification efforts, including by providing such authorizations and/or consents as may be necessary for MAA to obtain any additional documentation or information necessary for such investigations or verification.

I hereby apply for membership in Mishawaka Air Activities, Inc.

(Signature of Applicant)

Written Consent and Personal Guarantee of Parent(s) or Legal Guardian(s) for Minor Applicants:

(Date)

I represent and warrant that (a) I am the parent or legal guardian of the minor Applicant named above, (b) no court has issued any order, judgment, or decree granting custody of the minor Applicant to anyone else or otherwise affecting my rights as parent or legal guardian, (c) the minor Applicant has not been emancipated, (d) I have the legal right, power, and authority to consent to this application on behalf of the minor Applicant and myself, and (e) I am at least 18 years of age.

I have read, and I understand, this entire application, and by signing below, I hereby consent to and approve in all respects the terms and conditions of this application and the minor Applicant's execution of this application. I hereby further agree that both the minor Applicant and I shall be bound by all of the terms and conditions contained within this application or that are otherwise applicable to membership in MAA, and I hereby personally guarantee the complete performance by the minor Applicant of all duties and obligations that the minor Applicant may now or hereafter owe to MAA under this application or otherwise as a member of MAA, including, without limitation, all financial obligations to MAA, such as dues, fees, rental charges, and other charges.

Documents required to be submitted (as applicable) v	vith completed and signed Application:
(Signature of Parent or Legal Guardian)	(Date)
(Signature of Parent or Legal Guardian)	(Date)

- 1) <u>Pilot Certificate</u> (Except Student) 2) <u>Medical Certificate</u> (or Basic Med Certificate) (Except Student)
- 3) <u>Driver's License</u> 4) <u>MAA Release and Waiver Form</u> 5) <u>MAA Pilot History Form</u>

MICHIANA AIR ACTIVITIES FLYING CLUB			
For internal MAA Use Only:			
Date received:			
Board recommendation: IN FAVOR AGAINS	ST (attach explanation if against)		
Results of membership vote:			
APPROVED -			
Initiation fee paid	Schedule Master account created		
Orientation complete	Copies of required documents submitted		
Pilot History Form submitted			
DENIED – (Explain)			