

# WISCONSIN FOX RIVER FLYERS MEMBERSHIP APPLICATION FORM

Applicant's Name \_\_\_\_\_  
Last Middle Initial First

Address \_\_\_\_\_  
Street City State Zip

Phone \_\_\_\_\_  
Home Work Cell Fax

Email \_\_\_\_\_ Birth Date \_\_\_\_\_

Employer \_\_\_\_\_ Pilot Certificate Number \_\_\_\_\_

### Currency Certificates and Ratings

<input type="checkbox"/>	Private	<input type="checkbox"/>	Airplane
<input type="checkbox"/>	Commercial	<input type="checkbox"/>	Helicopter
<input type="checkbox"/>	ATP	<input type="checkbox"/>	Single Engine - Land / Sea (circle one)
<input type="checkbox"/>	Instrument Rating	<input type="checkbox"/>	Multi Engine - Land / Sea (circle one)
	Answer below – Have you ever:		Driver license # _____
	Been convicted of DWI? <span style="float: right;">Y / N</span>		Date of last BFR _____
	Had your Airman cert. suspended or revoked? <span style="float: right;">Y / N</span>		Date of last Medical _____
	Had your Medical suspended or revoked? <span style="float: right;">Y / N</span>		Class of last Medical _____

If you answered yes to any of the previous questions please indicate date, reason and current status: \_\_\_\_\_

Current Pilot Experience as of \_\_\_\_\_ (date)

Total Time PIC \_\_\_\_\_ Total Time All Aircraft \_\_\_\_\_

Total Time PA-28-235 \_\_\_\_\_ Total Time Cessna 172 \_\_\_\_\_

I, the undersigned, do hereby apply for membership in the Wisconsin Fox River Flyers, Inc. flying club. I understand that the Club is a non-profit/non-stock corporation under the laws of the State of Wisconsin. I understand that I will receive a copy of the current by-laws and operation rules of the corporation, and I agree to read, understand and adhere to and be governed by them while exercising my privileges as a member.

I also understand that if Club aircraft are flown or operated by me, or are permitted to be flown or operated by me, either on the ground or in the air, in violation of Federal Air Regulations or in violation of the Club rules of operation, I shall forfeit my privileges as a member of the Club: also, that I operate aircraft owned or controlled by the Club without personal liability to the Club or to its members. And that any passengers carried, while I am in command of Club aircraft, shall at no time be at the risk of the Club or members thereof.

This application must be accompanied by a one-dollar initiation fee with the understanding that the membership fee and monthly dues will be payable upon approval of this application.

I hereby authorize investigation, without liability, of all statements contained in this application and I authorize the Wisconsin Fox River Flyers, Inc. flying club operations officer to request a copy of my flight records from the Airmen's Certifications branch of the FAA Aeronautical Center.

Please complete this form, sign, date, and send it to the Membership Director, at the following address (the application will then be forwarded on to the Board Members):

Jon Stangel  
 c/o Wisconsin Fox River Flyers  
 1219 Woodview Dr.  
 Waukesha, WI 53189

(262) 366-9641  
 or email to: Jon.Stangel@wago.com

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_