

GACE FLYING CLUB
PROSPECTIVE MEMBER INTRO FORM

KINDLY PRINT ALL INFORMATION:

Today's date: ____/____/____

NAME: _____ **D.O.B.** ____/____/____
 First **Last**

SPOUSE: _____

ADDRESS: _____

HOW LONG AT THIS ADDRESS? _____ **Rent** _____ **Own** _____

CELL PHONE: () _____ **HOME PHONE:** () _____

EMAIL: _____

EMPLOYER: _____

ADDRESS _____ **PHONE** () _____

OCCUPATION: _____

LENGTH OF EMPLOYMENT: _____

NAME OF SPONSOR (if applicable) _____ **GACE #** _____

How did you learn of the GACE Flying Club?

Please tell us about your pilot status/experience: (e.g.: Prospective Student Pilot, prior training, Certificated Pilot: ratings, approx hrs., Medical currency, etc.)

Please briefly tell us why you are interested in joining the GACE Flying Club.

Signature