

Chenango RC Club

Membership Application

Name _____ Age _____ AMA # _____

Address _____

City _____ State _____ Zip _____

Day Telephone _____ Evening Telephone _____

Email address _____

I operate on channel number(s) _____

If accepted as a member, I agree to abide by the rules and regulations of the Chenango RC Club.

Signature _____ Date ____/____/____

AMA License Verified by _____ Approved for membership on ____/____/____

MEMBERSHIP DUES AND FEES

Initiation Fee \$25

ANNUAL DUES

Adult Membership \$50 (Anyone 18 years of age or older)

Junior Membership \$25 (Between 14-18 years of age, under 14 free)

Family Membership \$75

Total Enclosed: \$ _____

Return completed membership application, proof of AMA membership (photocopy of AMA card if mailing), and a check made payable to "Chenango RC Club" to any club officer or mail to:

Chenango RC Club
c/o Mark Larsen
Hillside House B-22
Norwich, NY 13815

Would you like your contact info listed on the Club's website?

Email Address Yes No
Phone Number Yes No